

I the undersigned hereby affirm that the attached document, including my exhibits, hereby submitted for recording does not contain the social security number of any person or persons (Per NRS 239B.030)

ASSESSOR'S PARCEL # 007-395-24  
COUNTY OF Eureka

When recorded mail to:

Name: Stewart Title Company  
Address/ City/ State/ Zip: P.O. Box 150214  
Ely, NV 89315

**AFFIDAVIT  
CONVERSION OF  
MANUFACTURED/MOBILE HOME  
TO REAL PROPERTY NRS 361.244**

**PART I: TO BE COMPLETED BY APPLICANT**

**MANUFACTURED/MOBILE HOME  
INFORMATION**

1. Owner/Buyer name PONY EXPRESS VILLAGE LLC
2. Owner of land (if leased) \_\_\_\_\_
3. Physical location of manufactured/mobile home 590 El Dorado, Eureka, NV 89316
4. Manufactured/mobile home description: Manufacturer CMH Manufacturing West Inc. Model Golden West  
Model Year 2008 Serial # ALB0323200R-AB  
Length 44' Width 324"
5. Mobile Home dealer (if new unit) Pony Express Village LLC
6. Current lien holder (if any) None
7. New lienholder:  
Name Mann Mortgage, LLC  
Address 1220 Whitefish Stage, Kalispell, MT 59901

**PART II: OWNER/BUYER SIGNATURE(S)**

The undersigned, as owner(s)/buyer(s) of the above described manufactured/mobile home and real property affirm that the home has been installed in accordance with all state and local building codes and agree(s) to the conversion of the above described home to real property, understanding that any liens or encumbrances on the unit may become a lien on the land. **THE COUNTY ASSESSOR WILL NOT SIGN THIS AFFIDAVIT UNTIL PERSONAL PROPERTY TAXES ARE PAID IN FULL FOR THE CURRENT FISCAL YEAR. ALL DOCUMENTS RELATING TO THE MANUFACTURED/MOBILE HOME AS PERSONAL PROPERTY MUST BE SURRENDERED TO THE MANUFACTURED HOUSING DIVISION. THIS CONVERSION IS NOT VALID UNTIL ISSUANCE OF A "REAL PROPERTY NOTICE". THE MANUFACTURED/MOBILE HOME WILL THEN BE PLACED ON THE SUCCEEDING TAX ROLL AS REAL PROPERTY.**

SIGNATURE-OWNER/BUYER DATE

Robert L. McMinn, Manager

PRINT NAME DATE

Robert L. McMinn 8-30-19

SIGNATURE-OWNER/BUYER DATE

PRINT NAME DATE

On August 30, 20 19, before me the undersigned, a Notary Public, in and for the State of Nevada, County of Wyon personally appeared

Robert L. McMinn

who acknowledged that he executed the affidavit.

Lakisha Sarina

Notary Public

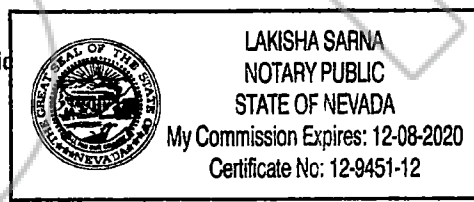
SIGNATURE-OWNER/BUYER DATE

Christopher Schiappa, DDS, Manager

PRINT NAME DATE

SIGNATURE-OWNER/BUYER DATE

PRINT NAME DATE



**PART III: TO BE COMPLETED BY COUNTY ASSESSOR**

1. Assessor parcel # 007-395-04 is currently owned by Pony Express Village, LLC  
Signature below indicates that land ownership has been verified and any personal property taxes owed for the current fiscal year have been collected.

Signature of Assessor or Deputy Assessor Kathy Bacon-Bowling Date 9-10-2019

**PART IV: TO BE COMPLETED BY THE PUBLIC WORKS DEPARTMENT**

- 1. Approved plot plan at this location verified by RDIJK Date 09/16/2019
- 2. Foundation meets requirements for this jurisdiction for conversion from personal property to real property verified by RDIJK Date 09/16/2019
- 3. Verification that running gear has been removed by RDIJK Date 09/16/2019

**DISTRIBUTION:**

**ORIGINAL TO MANUFACTURED HOUSING DIV.**

**COPY TO LIENHOLDER OR OWNER/BUYER**

**COPY TO COUNTY ASSESSOR**

\_\_\_\_\_  
SIGNATURE-OWNER/BUYER      DATE

Robert L. McMinn, Manager

\_\_\_\_\_  
PRINT NAME      DATE

\_\_\_\_\_  
SIGNATURE-OWNER/BUYER      DATE

\_\_\_\_\_  
PRINT NAME      DATE

\_\_\_\_\_  
SIGNATURE-OWNER/BUYER      DATE

Christopher Schiappa, DDS, Manager

\_\_\_\_\_  
PRINT NAME      DATE

*Christopher Schiappa* 9/4/19  
SIGNATURE-OWNER/BUYER      DATE

\_\_\_\_\_  
PRINT NAME      DATE

On \_\_\_\_\_, 20 \_\_\_\_\_, before me the undersigned, a Notary Public, in and for the State of Nevada, County of \_\_\_\_\_ personally appeared

\_\_\_\_\_  
who acknowledged that he executed the affidavit.

\_\_\_\_\_  
Notary Public

**PART III: TO BE COMPLETED BY COUNTY ASSESSOR**

1. Assessor parcel # \_\_\_\_\_ is currently owned by \_\_\_\_\_  
Signature below indicates that land ownership has been verified and any personal property taxes owed for the current fiscal year have been collected.

Signature of Assessor or Deputy Assessor \_\_\_\_\_ Date \_\_\_\_\_

**PART IV: TO BE COMPLETED BY THE PUBLIC WORKS DEPARTMENT**

1. Approved plot plan at this location verified by \_\_\_\_\_ Date \_\_\_\_\_
2. Foundation meets requirements for this jurisdiction for conversion from personal property to real property verified by \_\_\_\_\_ Date \_\_\_\_\_
3. Verification that running gear has been removed by \_\_\_\_\_ Date \_\_\_\_\_

**DISTRIBUTION:**

**ORIGINAL TO MANUFACTURED HOUSING DIV.**

**COPY TO LIENHOLDER OR OWNER/BUYER**

**COPY TO COUNTY ASSESSOR**

**CALIFORNIA JURAT WITH AFFIANT STATEMENT**

**GOVERNMENT CODE § 8202**

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], *not* Notary)

1 \_\_\_\_\_

2 \_\_\_\_\_

3 \_\_\_\_\_

4 \_\_\_\_\_

5 \_\_\_\_\_

6 \_\_\_\_\_

*Signature of Document Signer No. 1*

*Signature of Document Signer No. 2 (if any)*

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

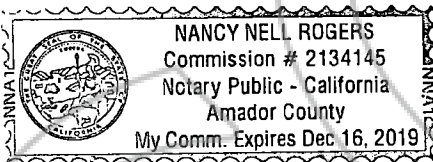
State of California  
 County of Amador

Subscribed and sworn to (or affirmed) before me  
 on this 9<sup>th</sup> day of September, 2019  
by Date Month Year

(1) Christopher Schiappa

(and (2) \_\_\_\_\_),  
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence  
 to be the person(s) who appeared before me.



Signature Nancy Nell Rogers  
Signature of Notary Public

*Seal*  
 Place Notary Seal Above

**OPTIONAL**

*Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_