APN# 007-380-43 (Must match APN# on document to be Recorded)

Department of Business and Industry Nevada Housing Division Manufactured Housing

Affidavit of Conversion to Real Property (TI-110)

County of

RECORDING COVER PAGE (Must be Typed or Printed legibly in black ink only. Do Not Print in 1" margins of this document)

EUREKA COUNTY, NV LAND-CMH Rec:\$37.00 Total:\$37.00 21ST MORTGAGE

10/09/2023 03:52 PM



KATHERINE J. BOWLING, CLERK RECORDER

Above Space for Recorder's Use ONLY

TITLE OF DOCUMENT:

AFFIDAVIT OF CONVERSION TO REAL PROPERTY TL-110 (Must match Title on document to be Recorded)

Please complete Affirmation Statement below:

I, the undersigned, hereby affirm that this document submitted for recording does not contain any personal information and or attion ecurity number of any person or persons (Per NRS 239B.030)

SIGNATURE TITLE Alicyn Pruitt CSR - 21st Mortgage PRINT NAME

RECORDING REQUESTED BY:

Alicyn Pruitt CSR - 21st Mortgage

Name

RETURN TO: Name: Alicyn Pruitt CSR - 21st Mortgage

Address: 620 Market St. Street Knoxville ΤN 37902 City State Zip Code

MAIL TAX STATEMENT TO: (Applicable to documents transferring real property)

Name: Alicyn Pruitt CSR - 21st Mortgage

Address: 620 Market St. Knoxville ΤN 37902 Street City State Zip Code

DEPARTMENT OF BUSINESS AND INDUSTRY NEVADA HOUSING DIVISION – MANUFACTURED HOUSING

1830 E. College Pkwy, #120, Carson City, Nevada 89706; Phone: 775-684-2940 3300 W. Sahara Ave. #320, Las Vegas, Nevada 89102; Phone: 702-486-4135 Website: housing.nv.gov / Email: titles@housing.nv.gov

AFFIDAVIT OF CONVERSION TO REAL PROPERTY (TL-110)

Applicant Phone Number (required): SECTION 1. DESCRIPTION OF THE STRUCTURE (Personal Property) Year; 2023	Applicant Email Address (required):		/		_ \ \
Year: 2023 Manufacturer: Fleetwood Homes Inc Model: Waverity Crest Prestige					
Serial #_FLE230ID2237840AB	SECTION 1. DESCRIPTION OF THE STRUC	CTURE (Personal F	Property)		\ \
Serial #_FLE230ID2237940AB Size: 96628	Year: 2023 Manufacturer: Fleetwood H	omes Inc	Model: W	averly Crest Pr	estige
Physical Location: 642 Sharrow Circle Drive	Serial #_FLE230ID2237940AB			/	
SECTION 2. DESCRIPTION OF REAL PROPERTY (Land) Assessor Parcel Number (APN): 007-380-43 Legal Description: See Attached Exhibit A SECTION 3. PERSONAL PROPERTY (Manufactured Home) Owner/Buyer(s): Gavin Broad & Julia Hayward	Manufacturer's Certificate of Origin #:	(If ava	ilable) Insignia 1	No.:	(If available)
SECTION 2. DESCRIPTION OF REAL PROPERTY (Land) Assessor Parcel Number (APN): 007-380-43 Legal Description: See Attached Exhibit A SECTION 3. PERSONAL PROPERTY (Manufactured Home) Owner/Buyer(s): Gavin Broad & Julia Hayward	Physical Location: 642 Sharrow Circle Drive	Eureka		NV	89316
Assessor Parcel Number (APN):	Succi	City		State	Zip Code
See Attached Exhibit A SECTION 3. PERSONAL PROPERTY (Manufactured Home) Owner/Buyer(s): Gavin Broad & Julia Hayward		ERTY (Land)		1	\
SECTION 3. PERSONAL PROPERTY (Manufactured Home) Owner/Buyer(s): Gavin Broad & Julia Hayward [Land Must be owned by Owner of the Manufactured Home unless land is leased per NRS 361.244.1.B] Mailing Address: 642 Sharrow Circle Drive City Eureka State NV Zip 89316 Current Lienholder (If Any): 21st Mortgage Corp. Mailing Address: 620 Market St. City Knoxville State TN Zip 37902 Assessor's Office Manufactured Home Account# (Assessor's Office) SECTION 4. LEASED REAL PROPERTY (LAND) (If Real Property Land is Leased in accordance with NRS 361.244.1.E Land Owner(s): E-Mail Address: City State Zip Current Lienholder (If Any): Mailing Address: City State Zip SECTION 5. ENFORCEMENT AGENCY ISSUING PERMIT & CERTIFICATE OF OCCUPANCY (If Applicable) Enforcement Agency: Agency Official Name: Agency Official's Email: Phone Number: Building Permit No: (If Applicable) Permanent Foundation System Installation	Assessor Parcel Number (APN): 007-380-43			1 1	
SECTION 3. PERSONAL PROPERTY (Manufactured Home) Owner/Buyer(s): Gavin Broad & Julia Hayward	Legal Description:				
SECTION 3. PERSONAL PROPERTY (Manufactured Home) Owner/Buyer(s): Gavin Broad & Julia Hayward	See Attached Exhibit	ΕΛ			
Owner/Buyer(s): Gavin Broad & Julia Hayward [Land Must be owned by Owner of the Manufactured Home unless land is leased per NRS 361.244.1.B] Mailing Address: 642 Sharrow Circle Drive City Eureka State NV Zip 89316 Current Lienholder (If Any): Mailing Address: 620 Market St. City Knoxville State TN Zip 37902 Assessor's Office Manufactured Home Account# (Assessor's Office) SECTION 4. LEASED REAL PROPERTY (LAND) (If Real Property Land is Leased in accordance with NRS 361.244.1.E Land Owner(s): E-Mail Address: City State Zip Current Lienholder (If Any): Mailing Address: City State Zip SECTION 5. ENFORCEMENT AGENCY ISSUING PERMIT & CERTIFICATE OF OCCUPANCY (If Applicable) Enforcement Agency: Agency Official Name: Agency Official's Email: Phone Number: [If Applicable] Permanent Foundation System Installation	See Attached Exhibit	LA \			
Owner/Buyer(s): Gavin Broad & Julia Hayward [Land Must be owned by Owner of the Manufactured Home unless land is leased per NRS 361.244.1.B] Mailing Address: 642 Sharrow Circle Drive City Eureka State NV Zip 89316 Current Lienholder (If Any): 21st Mortgage Corp. Mailing Address: 620 Market St. City Knoxville State TN Zip 37902 Assessor's Office Manufactured Home Account# (Assessor's Office) SECTION 4. LEASED REAL PROPERTY (LAND) (If Real Property Land is Leased in accordance with NRS 361.244.1.E Land Owner(s): E-Mail Address: City State Zip Current Lienholder (If Any): Mailing Address: City State Zip SECTION 5. ENFORCEMENT AGENCY ISSUING PERMIT & CERTIFICATE OF OCCUPANCY (If Applicable) Enforcement Agency: Agency Official Name: Agency Official's Email: Phone Number: Building Permit No.: (If Applicable) Permanent Foundation System Installation	SECTION 3. PERSONAL PROPERTY (Manual	factured Home)	/ /		
[Land Must be owned by Owner of the Manufactured Home unless land is leased per NRS 361.244.1.B] Mailing Address: 642 Sharrow Circle Drive	SECTION OF ENGOVIEW I NOT EXTENSIVE	actured frome)			
Mailing Address: 642 Sharrow Circle Drive	Owner/Buyer(s): Gavin Broad & Julia Hayward	E-Mail Add	ress:		
Current Lienholder (If Any): 21st Mortgage Corp. Mailing Address: 620 Market St. City Knoxville State TN Zip 37902 , Assessor's Office Manufactured Home Account# (Assessor's Office) SECTION 4. LEASED REAL PROPERTY (LAND) (If Real Property Land is Leased in accordance with NRS 361.244.1.E Land Owner(s): E-Mail Address: State Zip , Current Lienholder (If Any): State Zip , Mailing Address: City State Zip , SECTION 5. ENFORCEMENT AGENCY ISSUING PERMIT & CERTIFICATE OF OCCUPANCY (If Applicable) Enforcement Agency: Agency Official Name: Phone Number: Building Permit No.: (If Applicable) Permanent Foundation System Installation	[Land Must be owned by Owner of the Manufactur	red Home unless lan	d is leased per N	NRS 361.244.	1.B]
Mailing Address: 620 Market St. City Knoxville State TN Zip 37902 , Assessor's Office Manufactured Home Account#	Mailing Address: 642 Sharrow Circle Drive	City_Eureka	\	State_NV_	_ Zip <u>89316</u> ,
Assessor's Office Manufactured Home Account#	Current Lienholder (If Any): 21st Mortgage Corp.	1	/ /		
Assessor's Office Manufactured Home Account#	Mailing Address: 620 Market St.	City_Knoxville	\ \	State_TN	_ Zip_37902
Land Owner(s):	Assessor's Office Manufactured Home Account#_				
Land Owner(s):	SECTION 4. <u>LEASED</u> REAL PROPERTY (LA	ND) (If Real Proper	rty Land is Leas	ed in accorda	ence with NRS 361.244.1.B
Mailing Address:			/ /		•
Mailing Address:	Land Owner(s):	E-Mail Address:_			
Mailing Address:				_State	_Zip,
SECTION 5. ENFORCEMENT AGENCY ISSUING PERMIT & CERTIFICATE OF OCCUPANCY (If Applicable) Enforcement Agency: Agency Official Name: Agency Official's Email: Phone Number: Building Permit No.: (If Applicable) Permanent Foundation System Installation	Current Lienholder (If Any):				
Enforcement Agency:Agency Official Name: Agency Official's Email:Phone Number: Building Permit No.:(If Applicable) Permanent Foundation System Installation	Mailing Address:	City		_State	_Zip,
Enforcement Agency: Agency Official Name: Agency Official's Email: Phone Number: Building Permit No.: (If Applicable) Permanent Foundation System Installation	SECTION 5. ENFORCEMENT AGENCY ISSU	IING PERMIT & (CERTIFICATI	E OF OCCU	PANCY (If Applicable)
Agency Official's Email:Phone Number:		/			(11 /
Building Permit No.:(If Applicable) Permanent Foundation System Installation	Enforcement Agency:	Agency Official 1	Name:		
			Phone Nu	mber:	
Installation Seal No.:Agency Official Signature:	Building Permit No.:	(If Appl	icable) Permane	nt Foundatio	n System Installation
	Installation Seal No.:	Agency Official	Signature:		

[This document is evidence that the indicated <u>Enforcement Agency</u> has issued a Certificate of Occupancy for installation of the Permanent Foundation System for the unit upon the real property, both as described herein, as of the date of recording by the County Recorder. When recorded, this document (**Form TL-110**) shall be submitted to the Nevada Housing Division].

SECTION 6. DEALER INFORMATION (If a Dealer was involved in the sale of the manufactured home)

Dealer Name: Tim Vidrine	_Dealer License No.: B1618E-Mail:
Mailing Address: 1760 N Street	City Ely State NV 7:- 80301
Note: A Copy of the Dealer Report of Sale (DF	S) may be attached to this TL-110 Form
	ZATION (Do not sign until in front of a Notary)
home has been installed in accordance with all	ove described manufactured/mobile home and real property (unless leased as indicated NRS 361.244.1.B), affirm that the running gear has been removed per NRS 361.244, the state and local building codes and agree(s) to the conversion of the above described ens or encumbrances on the unit may become a lien on the land.
	submitted for recording does not contain any personal information
Gavin Broad	Julia Havward
Print Name	Print Name
Signature of Landowner (s) (If Leased)	Signature of Landowner (s) (If Leased)
Print Name	Print Name
1st Mortgage Corporation All	yna Palott
Signature of Lienholder (s) (If Any)	Signature of Lienholder (s) (If Any)
21st Mortgage Corp.	
Print Name	Print Name
State ofCountyCounty Subscribed and sworn to before me,	(FOR NOTARY USE ONLY) State of County
(Name of Notary Public)	(Name of Notary Public)
on this 2 day of July, 2023	on this Ale day of Try, 20 23
by Gavin Broad POA 71st	by Julia Hayward POA
mortgage	- 21st mortgage
(Printed name of party appearing before Notary)	(Printed name of party appearing before Notary)
\ \	c remind of party appearing before rotary)
monthelim minim	HChilly Commit Holeman
Notary Public Signature J Notary Stamp of Sel	Notary Public Signature Notary Stamp by Seal
Notary Public Signature Notary Stampor SS STAT OF TENNES NOT PUBLISHED PUBLISHED NOT PUBLISHED NOT PUBLISHED NOT PUBLISHED NOT PUBLISHED PUBLISHED NOT PUBLISHED PUBLISHED NOT PUBLISHED PUBLISHED PUB	SEE Z
NOT/	RY C TENNESSEE Z
THE PUBLICATION OF THE PUBLICATI	NOTARY N
The transfer	PUBLIC NO.
) I D =	

When Recorde	office. The manufactured house wi	Il then be placed on the next	succeeding tax roll as re	
	Street	City	State	Zip
Distribution:	ORIGINAL to Nevada Housing COPY to Lien holder or Owner. E-MAIL to Lien holder, Owner.	/Buyer		
		_ \	V / "	
			\ \	
	\\\			And the second
//			/	× . ,
	\wedge			
\)		