



ASSESSOR'S PARCEL # 1420-07-817-021

COUNTY OF DOUGLAS

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

PART I TO BE COMPLETED BY APPLICANT

MANUFACTURED/MOBILE HOME INFORMATION

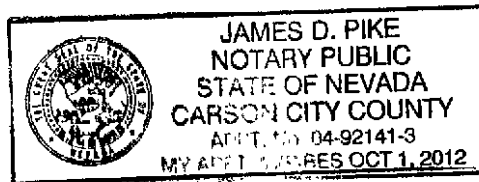
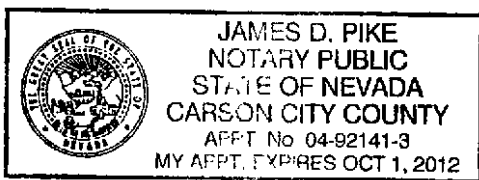
1. Owner/Buyer name PATRICIA M. BELL
2. Owner of land (if leased) _____
3. Physical location of manufactured/mobile home 932 LOYOLA ST., CARSON CITY, NV 89705
4. Mobile home description: Manufacturer WESWAY HOMES Model WWA
Model Year 1979 Serial # 1339 Length _____ Width _____
5. Mobile home dealer (if new unit) _____
6. Current lien holder (if any) N/A
7. New lien holder: Name _____
Address _____

PART II OWNER/BUYER SIGNATURE(S)

The undersigned, as owner(s)/buyer(s) of the above described manufactured/mobile home and real property, agrees to the conversion of the above described unit from personal to real property and understands that any liens or encumbrances on that unit may become a lien or encumbrance on that land. **PERSONAL PROPERTY TAXES MUST BE PAID IN FULL FOR THE CURRENT FISCAL YEAR.**

*This conversion process is not valid until issuance of a "Real Property Notice" by Manufactured Housing Division.

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 NEXT SUCCEEDING TAXROLL AS REAL PROPERTY.



Patricia Bell 3-16-2011
SIGNATURE-OWNER/BUYER DATE

SIGNATURE-OWNER/BUYER DATE

County of Douglas

State of Nevada

On MARCH 10th, 2011, before me the undersigned, a Notary Public,
in and for the State of Nevada, County of DOUGLAS personally appeared
PATRICIA M BELL And _____
Who acknowledged that s/he executed this affidavit.

James D. Pike
Notary Public

PART III 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 _____

PART IV TO BE COMPLETED BY COUNTY ASSESSOR

- 1. Land ownership verified by _____ Date _____
- 2. Manufactured home ownership verified by _____ Date _____
- 3. Manufactured home account no. _____ verified by _____ Date _____

SIGNATURE (ASSESSOR)

NAME/TITLE

DATE

When recorded mail to:
Name: **PERFORMANCE TITLE**
Address: **4405 E. ALOHA DRIVE, NO.2**
City, State, Zip: **DIAMONHEAD, MS 39525**

DISTRIBUTION:
ORIGINAL TO MANUFACTURED HOUSING
COPY TO COUNTY ASSESSOR
COPY TO LIENHOLDER OR OWNER