

DOUGLAS COUNTY, NV

2015-857459

Rec:\$17.00

\$17.00 Pgs=4

02/26/2015 10:36 AM

STEWART TITLE VACATION OWNERSHIP

KAREN ELLISON, RECORDER

<b>A.P.N. #</b>	A ptn of 1319-30-644-056
<b>Escrow No.</b>	20142361- TS/AH
<b>Title No.</b>	None
<b>Recording Requested By:</b>	
Stewart Vacation Ownership	
<b>Mail Tax Statements To:</b>	
Ridge Tahoe P.O.A. P.O. Box 5790 Stateline, NV 89449	
<b>When Recorded Mail To:</b>	
Erika H. Cestr 18542 Vallarta Dr. Huntington Beach, CA 92646	

**AFFIDAVIT – DEATH OF JOINT TENANT**

State of CALIFORNIA            }  
County of Orange            } ss.

ERIKA H. CESTR, of legal age, being first duly sworn, deposes and says: That **WOLFGANG HABEL**, the decedent mentioned in the attached certified copy of Certificate of Death, is the same person as **WOLFGANG HABEL** named as one of the parties in that certain GRANT, BARGAIN, SALE DEED dated August 10, 1991 executed by **HARICH TAHOE DEVELOPMENTS**, a Nevada general partnership to **WOLFGANG HABEL**, an unmarried man and **ERIKA R. CESTR**, an unmarried woman together as joint tenants, recorded as Document No. 258426, on August 21, 1991 in Book 891, Page No. 3596 of Official Records of Douglas, Nevada, covering the following described property situated in Douglas County, State of Nevada:

The Ridge Tahoe, Plaza Building, Prime Season, Account #3714825A, Stateline, NV 89449. See Exhibit 'A' attached hereto and by this reference made a part hereof.

Dated: 1.15.15

Erika H. Cestr  
Erika H. Cestr

**This document is recorded as an ACCOMMODATION ONLY and without liability for the consideration therefore, or as to the validity or sufficiency of said instrument, or for the effect of such recording on the title of the property involved.**

(One Inch Margin on all sides of Document for Recorder's use Only)

**ACKNOWLEDGMENT**

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 Orange }

On 1-15-15 before me, Tazia San Agustin Notary Public  
(here insert name and title of the officer)

personally appeared ERIKA H. CESTR

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature *Tazia San Agustin*



(Seal)

**STATE OF CALIFORNIA**  
**CERTIFICATION OF VITAL RECORD**

**COUNTY OF ORANGE**  
**HEALTH CARE AGENCY**

1719 W. 17TH STREET • SANTA ANA, CALIFORNIA 92706

**CERTIFICATE OF DEATH**

3 199830 009229

STATE FILE NUMBER		USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 11/96)				LOCAL REGISTRATION NUMBER	
DECEDENT PERSONAL DATA	1. NAME OF DECEDENT—FIRST (GIVEN) Wolfgang		2. MIDDLE -		3. LAST (FAMILY) Habel		
	4. DATE OF BIRTH MM/DD/CCYY 05/06/1940		5. AGE YRS. 58		6. SEX M		7. DATE OF DEATH MM/DD/CCYY 07/20/1998
	8. HOUR 1710		9. STATE OF BIRTH Germany		10. SOCIAL SECURITY NO. -9507		11. MILITARY SERVICE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
	12. MARITAL STATUS Divorced		13. EDUCATION—YEARS COMPLETED 11		14. RACE Caucasian		
	15. HISPANIC—SPECIFY <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		16. USUAL EMPLOYER Self Employed		17. OCCUPATION Mechanic		
USUAL RESIDENCE	18. KIND OF BUSINESS Auto		19. YEARS IN OCCUPATION 30		20. RESIDENCE—STREET AND NUMBER OR LOCATION 18542 Vallarta		
	21. CITY Huntington Beach		22. COUNTY Orange		23. ZIP CODE 92646		24. YRS IN COUNTY 20
	25. STATE OR FOREIGN COUNTRY CA		26. RESIDENCE—STREET AND NUMBER OR LOCATION 18542 Vallarta Huntington Beach, Ca. 92646				
INFORMANT	27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 18542 Vallarta Huntington Beach, Ca. 92646		28. NAME OF SURVIVING SPOUSE—FIRST -				
	29. MIDDLE -		30. LAST (MAIDEN NAME) -				
SPOUSE AND PARENT INFORMATION	31. NAME OF FATHER—FIRST Gerhard		32. MIDDLE -		33. LAST Habel		34. BIRTH STATE Germany
	35. NAME OF MOTHER—FIRST Frieda		36. MIDDLE -		37. LAST (MAIDEN) Preuss		38. BIRTH STATE Germany
	39. DATE MM/DD/CCYY 07/23/1998		40. PLACE OF FINAL DISPOSITION 3 Miles off the coast of Dana Point, Ca.				
FUNERAL DIRECTOR AND LOCAL REGISTRAR	41. TYPE OF DISPOSITION(S) CR/SEA		42. SIGNATURE OF EMBALMER ▶ Not Embalmed			43. LICENSE NO. -	
	44. NAME OF FUNERAL DIRECTOR ATLANTIS CREMATION & BURIAL		45. LICENSE NO. FD1494		46. SIGNATURE OF LOCAL REGISTRAR ▶ <i>[Signature]</i>		47. DATE MM/DD/CCYY 07/21/1998
PLACE OF DEATH	101. PLACE OF DEATH Hospice Fam. Care SNF		102. IF HOSPITAL, SPECIFY ONE: <input type="checkbox"/> IP <input type="checkbox"/> ER/OP <input type="checkbox"/> DOA		103. FACILITY OTHER THAN HOSPITAL: <input type="checkbox"/> CONV. HOSP. <input type="checkbox"/> RES. CARE <input type="checkbox"/> OTHER		104. COUNTY Orange
	105. STREET ADDRESS—STREET AND NUMBER OR LOCATION 11250 Warner Ave. 4th Floor		106. CITY Fountain Valley				
CAUSE OF DEATH	107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)					TIME INTERVAL BETWEEN ONSET AND DEATH	
	(A) Bony Metastasis					7 MO	
	DUE TO (B) Adenocarcinoma of Recto-Sigmoid Colon					16 MO	
	DUE TO (C)						
	DUE TO (D)						
108. DEATH REPORTED TO CORONER <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO REFERRAL NUMBER							
109. BIOPSY PERFORMED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO							
110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107							
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. 134.0 Anterior Resection of Colon 03/--/1996							
PHYSICIAN'S CERTIFICATION	114. I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE DEATH OCCURRED AT THE HOUR, DATE AND PLACE STATED FROM THE CAUSES STATED. DECEDENT ATTENDED SINCE M M / D / C C Y Y		115. SIGNATURE AND TITLE OF CERTIFIER ▶ <i>[Signature]</i> M.D.		116. LICENSE NO. A31198		117. DATE MM/DD/CCYY 07/21/1998
	DECEDENT LAST SEEN ALIVE M M / D / C C Y Y 07/16/1998		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP A. Steinmann MD 11250 Warner Ave. Fountain Valley, Ca. * 92708				
CORONER'S USE ONLY	119. MANNER OF DEATH <input type="checkbox"/> NATURAL <input type="checkbox"/> SUICIDE <input type="checkbox"/> HOMICIDE <input type="checkbox"/> ACCIDENT <input type="checkbox"/> PENDING INVESTIGATION <input type="checkbox"/> COULD NOT BE DETERMINED		120. INJURY AT WORK <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		121. INJURY DATE M M / D / C C Y Y		122. HOUR
	123. PLACE OF INJURY						
	124. DESCRIBE HOW INJURY OCCURRED (EVENTS WHICH RESULTED IN INJURY)						
125. LOCATION (STREET AND NUMBER OR LOCATION AND CITY, ZIP)							
126. SIGNATURE OF CORONER OR DEPUTY CORONER				127. DATE MM/DD/CCYY		128. TYPED NAME, TITLE OF CORONER OR DEPUTY CORONER	
STATE REGISTRAR		A		B		C	
D		E		F		G	
H		FAX AUTH. # 5740		CENSUS TRACT			

CERTIFIED COPY OF VITAL RECORDS

STATE OF CALIFORNIA }  
 COUNTY OF ORANGE } SS

DATE ISSUED  
**AUG 18 1998**

This is a true and exact reproduction of the document officially registered and placed on file in the office of the VITAL RECORDS SECTION, ORANGE COUNTY HEALTH CARE AGENCY.

*[Signature]*  
 HUGH F. STALLWORTH, M.D.  
 COUNTY HEALTH OFFICER  
 REGISTRAR OF VITAL STATISTICS

This copy not valid unless prepared on engraved border displaying seal and signature of Registrar.



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

**EXHIBIT "A"**

**(37)**

**An undivided 1/51st interest as tenants in common in and to that certain real property and improvements as follows: (A) An undivided 1/106<sup>th</sup> interest in and to Lot 37 as shown on Tahoe Village Unit No. 3 - 13<sup>th</sup> Amended Map, recorded December 31, 1991, as Document No. 268097, re-recorded as Document No. 269053, Official Records of Douglas County, State of Nevada, excepting therefrom Units 039 through 080 (inclusive) and Units 141 through 204 (inclusive) as shown on that certain Condominium Plan recorded July 14, 1988, as Document No. 182057; and (B) Unit No. 148 as shown and defined on said Condominium Plan; together with those easements appurtenant thereto and such easements described in the Fourth Amended and Restated Declaration of Time Share Covenants, Conditions and Restrictions for The Ridge Tahoe recorded February 14, 1984, as Document No. 096758, as amended, and in the Declaration of Annexation of The Ridge Tahoe Phase Five recorded August 18, 1988, as Document No. 184461, as amended, and as described in the Recitation of Easements Affecting the Ridge Tahoe recorded February 24, 1992, as Document No. 271619, and subject to said Declarations; with the exclusive right to use said interest in Lot 37 only, for one week each year in the Prime "Season" as defined in and in accordance with said Declarations.**

**A Portion of APN: 1319-30-644-056**