DOUGLAS COUNTY, NV Rec:\$35.00

2018-917230 07/26/2018 11:13 AM

Total:\$35.00 BRIAN MCINTYRE

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APN# 1319-30-633 (001-004 SEE) AFAACHIO		
Recording Requested by/Mail to:	0076815201809172300100100	
Name: Brian L McIntiple	AREN ELLISON, RECORDER	
Address: PO Box 11761	\ \	
City/State/Zip: Rem, NV 89510	\\	
Mail Tax Statements to:		
Name: Brian L McIntyre		
Address: 10 Box 11761		
City/State/Zip: Reno, NV 89510		
Buldry Martinge Agreeme	+	
Title of Document (required)		
(Only use if applicable)		
The undersigned hereby affirms that the document submitte DOES contain personal information as required by law: (che	3	
Affidavit of Death – NRS 440.380(1)(A) & NRS 4	0.525(5)	
Judgment – NRS 17.150(4)		
Military Discharge – NRS 419.020(2)		
Signature		
Printed Name		
This document is being (re-)recorded to correct document #	, and is correcting	

Parcel Numbers: 1319-30-633-001 1319-30-633-002 1319-30-633-003 1319-30-633-004

BUILDING MAINTENANCE AGREEMENT

PURPOSE: The Owners of the real property commonly known as 368 Quaking Aspen Lane, Unit's A, B, C, and D, City of Stateline, County of Douglas, State of Nevada, all agree to be in furtherance of a plan for the building and every part thereof. For the purposes of this Agreement, Owners shall include any person owning an interest in real property units within the boundaries of Tahoe Village Lot 69. This Agreement is to provide for the maintenance, improvement and preservation of the property for the benefit of each and every Owner.

MAINTENANCE AND REPAIR: The Owner of each Unit shall maintain the unit, the landscaping and all improvements located thereon including but not limited to structures, decks, stairwells, walkways, gutters, chimneys, shutters, awnings, handrails, hot tub and utility connections in good condition and state of repair and adequately painted or otherwise finished, all at such Owner's sole cost and expense. No Improvement on any Unit shall be permitted to fall into disrepair. All rubbish, trash and garbage shall be regularly removed from the Units and shall not be allowed to accumulate thereon. Owners shall be responsible for cleaning up after and any resulting damage to the property caused by pets, children, tenants or guests of the Unit.

No Owner shall do any act or work that will impair the structural integrity or safety of any unit located within the structure. All maintenance, repair and improvements shall be performed in a good and workmanlike manner and in compliance with all applicable Building Codes. The color or appearance of any improvement or repair shall not be offensive to the general appearance of the building. All improvement and repair must be in compliance with all applicable Tahoe Village Covenants, Conditions and Restrictions.

COMMON AREAS: The common area is for the use and enjoyment of all Owners. All utility and supply expenses incurred in the common interest of relaxation, maintenance, improvement and preservation shall be assessed to all Owners equally, this includes but is not limited to common elements such as the hot tub, roof de-ice cables and exterior common stairway lighting.

The hot tub is for the sole use of the Owners. One Owner must be present on the property at all times the hot tub is in use. The hot tub cover will be closed and locked at all times while not in use. Only Owners will be provided the security code and it shall not be shared with anyone besides Owners with interest in the property. For health, safety and liability concerns, absolutely no renters shall be allowed use of the hot tub at any time. If a Unit is to be rented, the Owner shall provide notice to the renters that they are to use the Tahoe Village Homeowners Association pool and hot tub for relaxation and enjoyment.

The building structure contains a crawlspace underneath the Units on each side of the property. The two Owners on each respective side share the space below the two Units above. Both crawl space doors are keyed the same, and shall remain accessible to all Unit Owners at all times for access to utility shut-offs and clean outs. Renters shall not be granted access to the crawlspace at any time.

CAPITAL ADDITIONS AND IMPROVEMENT ASSESSMENTS FOR COMMON ELEMENTS: Upon approval of the Owners, the total cost for a capital improvement to a common element shall be assessed to all owners equally, by unit, each unit being equal to one quarter or twenty five percent (25%), or as otherwise agreed upon. Capital improvement and addition assessments shall be due and payable by all Owners in such installments and during such period or periods as the Owners shall designate

INSURANCE: Owners must, at their sole cost and expense, obtain and maintain in effect policies of insurance adequate, in the reasonable opinion of the owners in kind and amount. Without limiting the generality of the preceding sentence, such policies of insurance may include fire and extended coverage insurance on all improvements owned; bodily injury and property liability insurance; and such other insurance, as the owners shall deem necessary or appropriate to protect the building structure.

OBLIGATIONS OF OWNERS: No Owner may avoid the burden or obligation incidental to ownership by nonuse of any Common element or the facilities located thereon or by abandonment of his interest in a unit. This Agreement shall run with said real property comprising 368 Quaking Aspen Lane, Unit's A, B, C and D, Stateline, Nevada and shall be binding upon, for the benefit of the building as a whole, each Owner, and each party having or acquiring any right, title or interest or any part thereof and shall be binding upon each successor in interest thereto. Upon the conveyance, sale, assignment or other transfer of an interest in a unit to a new Owner, the transferring Owner shall provide notice of such transfer to the other Owners and convey upon the new owner in the sales documentation the agreement for maintenance and preservation of the property.

This Building Maintenance Agreement supersedes the previous signed agreement dated the 5th of November, 2011.

WE, THE UNDERSIGNED, being Owners of the real property commonly known as 368 Quaking Aspen Lane, Unit's A, B, C and D, City of Stateline, County of Douglas, State of Nevada, for the purpose of maintenance and preservation, do hereby acknowledge this Agreement.

SIGNED:/	α	
1 Any Bull		3-16-18
Matt Buell or Amy Buell	See Alachant	Date
Unit A – APN #1319-30-633-001		1 12 18
Drow Cu		1-13-18
Scott F. Cumine or Krista H. Lovejoy	See Attached California	Date
Unit B – APN #1319-30-633-002	Acknowledgement/Jurat	
Luy &White		24 JAN 18
Jerry G. Wicks or Scott R. Davis PLEASE	SEE ATTACHMENT	Date
Unit C – APN #1319-30-633-003		,
Bin Melling	- NA. W	2/2/18
Megan McIntyre, Brian McIntyre, John R.	Brown or Leah J. Brown	Dáte
Unit D – APN #1319-30-633-004	,	
Change	STATE OF <u>NOUTON</u> COUNTY OF <u>was to</u> e	
BRUNO MENA NOTARY PUBLIC STATE OF NEVADA No. 14-15521-2 My Appt Exp. Oct 27, 2018	The foregoing instrument was acknowle me this 2 day of FeB, 2014, by Notary Public's Signature Notary Na	DRIAN L. MCHTYRE
	Personally Known OR Type of Identification Produced NVDL	••••
	110000000 14 1100	

ADDENDUM

The Owners of the real property commonly known as 368 Quaking Aspen Lane, Unit's A, B, C, and D, City of Stateline, County of Douglas, State of Nevada, all agreeing to be in furtherance of a plan for improvement and maintenance of the property do hereby agree to maintenance costs and duties of the jointly owned common area hot tub. Hot tub is for the enjoyment of the Owners and their guests, but not for rental guests. All costs will be divided equally.

SIGNED:	
Matt Buell or Amy Buell	Saz Valtachment Date
Jan L	See Attached California Date
Scott F. Cumine or Krista H. Lovejoy	See Attached California Date Acknowledgement/Jurat
July Millet	24 Jan 18
Jerry G Wicks or Scott R. Davis	PLEASE SEE ATTACHMENT Date
BinMelto	2/2/18
Megan McIntyre, Brian McIntyre, John R.	Brown or Leah J. Brown Date
Secretario de la compositio de la compos	
BRUNO MENA NOTARY PUBLIC STATE OF NEVADA NO. 14-15521-2 My Appl. Exp. Oct. 27, 2018	STATE OF NOUNOR COUNTY OF LUNSHUE
**************************************	The foregoing instrument was acknowledged before me this 2 day of Fr.5, 2018, by BRINN I. INCINITYZE Notary Publick Signature Notary Name Personally Known OR /pe of Identification Produced NOTARION PRODUCED N

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

VACIATION ALLE-FOR THE COLOR AND
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 Contra Costa) Cynthia M. Lee, Notary Public
On <u>Varch 16. 2018</u> before me,
personally appeared Amy buncan Buell
Name(s) of Signer(s)
who proved to me on the basis of satisfactory evidence to be the person(e) 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(e) on the instrument the person(e), 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.
CYNTHIA M. LEE Commission No.2151452 NOTARY PUBLIC-CALIFORNIA ALAMEDA COUNTY My Comm. Expires APRIL 30, 2020 WITNESS my hand and official seal. Signature Signature Signature of Notary Public
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
Document Date: 310 6 Number of Pages: 7
Signer(s) Other Than Named Above:
Capacity(ies) Claimed by Signer(s) Signer's Name: Signer's Name:
Corporate Officer — Title(s): Corporate Officer — Title(s):
☐ Partner ─ ☐ Limited ☐ General ☐ Partner ─ ☐ Limited ☐ General ☐ Individual ☐ Attorney in Fact ☐ Individual ☐ Attorney in Fact ☐ Trustee ☐ Guardian or Conservator ☐ Trustee ☐ Guardian or Conservator
Other: Cother: Signer Is Representing: Signer Is Representing:
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CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

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A notary public or other officer completing this certifical document to which this certificate is attached, and not the	te verifies only the identity of the individual who signed the e truthfulness, accuracy, or validity of that document.
State of California) County of Contra Casta)	Cynthia M. Lee, Notary Public
On <u>Warch 16, 2018</u> before me,	Here Insert Name and Title of the Officer
— 	
personally appeared Amy tuncon B	Name(s) of Signer(s)
subscribed to the within instrument and acknowle	evidence to be the person(e) whose name(s) is/are edged to me that he/she/they executed the same in a/her/their signature(e) on the instrument the person(s), ted, executed the instrument.
CYNTHIA M. LEE Commission No. 2151452 NOTARY PUBLIC-CALIFORNIA ALAMEDA COUNTY My Comm. Expires APRIL 30, 2020 Place Notary Seal Above	certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph s true and correct. WITNESS my hand and official seal. Signature Signature of Notary Public
	TONAL
	information can deter alteration of the document or form to an unintended document.
Description of Attached Document	/ /
Title or Type of Document: Addendum	
Document Date: 3/16/15	Number of Pages:
Signer(s) Other Than Named Above:	
Capacity(ies) Claimed by Signer(s)	
Signer's Name:	Signer's Name:
☐ Corporate Officer — Title(s):	Corporate Officer — Title(s):
☐ Partner — ☐ Limited ☐ General	□ Partner — □ Limited □ General
☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator
Other: Signer Is Representing:	Other:
Signer is hebieseilling.	Signer Is Representing:

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JURAT

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 Contra Costa

Subscribed and sworn to (or affirmed) before me on this 13th day of January

20 18 by Scott Fraser Cumine

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

Signature

(Seal)



OPTIONAL INFORMATION

lollow this form, the notary must

Building Maintenance (Title or description of lattached document)

(Title of description of attached document continued)

Number of Pages $\frac{2}{\sqrt{3/8}}$ Document Date $\frac{1/3/8}{\sqrt{3}}$

Additional information

Agreement

The wording of all Jurats completed in California after January 1, 2015 must be in the form as set forth within this Jurat. There are no exceptions, if a Jurat to be completed does not follow this form, the notary must correct the verbiege by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one with does contain the proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

INSTRUCTIONS

- State and county information must be the state and county where the document signer(s) personally appeared before the notary public.
- Date of notarization must be the date the signer(s) personally appeared which must also be the same date the jurat process is completed.
- Print the name(s) of the document signer(s) who personally appear at the time of notarization.
- Signature of the notary public must match the signature on file with the
 office of the county clerk.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different jurat form.
 - Additional information is not required but could help to ensure this jurat is not misused or attached to a different document.
 - Indicate title or type of attached document, number of pages and date.
- Securely attach this document to the signed document with a staple.

JURAT

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 Contra Costa

Subscribed and sworn to (or affirmed) before me on this 13th day of January

2018 by Scott Fraser Cumine

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

Signature /

(Seal)

OPTIONAL INFORMATION

DESCRIPTION OF THE ATTACHED DOCUMENT

Addendum

(Title or description of attached document)

(Title or description of attached document continued)

Additional information

INSTRUCTIONS

CRISTINA M. ALTAMIRANO Notary Public – California Contra Costa County Commission # 2208506 My Comm. Expires Aug 3, 2021

The wording of all Jurats completed in California after January 1, 2015 must be in the form as set forth within this Jurat. There are no exceptions. If a Jurat to be completed does not follow this form, the notary must correct the verbiege by using a jurat stamp containing the correct wording or attaching a separate jurat form such as this one with does contain the proper wording. In addition, the notary must require an oath or affirmation from the document signer regarding the truthfulness of the contents of the document. The document must be signed AFTER the oath or affirmation. If the document was previously signed, it must be re-signed in front of the notary public during the jurat process.

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 - Indicate title or type of attached document, number of pages and date.
- · Securely attach this document to the signed document with a staple.

CALIFORNIA ALL- PURPOSE CERTIFICATE OF 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.

County of Solano	}
On January 24, 2018 before me, _	N. Dang, Notary Public (Here insert name and title of the officer)
personally appeared Jerry G. Wicks	
name(s)(s)are subscribed to the within	instrument and acknowledged to me that
	er/their authorized capacity(ies), and that by ent the person(s) , or the entity upon behalf of
which the person(s) acted, executed the	
Loorlify under DENALTY OF DED ILIDY	under the laws of the State of California that
the foregoing paragraph is true and cor	
	N. DANG
WITNESS my hand and official seal.	NOTARY PUBLIC - CALIFORNIA COMMISSION # 2087225 SOLANO COUNTY
- Must	My Comm. Exp. October 23, 2018
Notary Public Signature (No	otary Public Seal)
ADDITIONAL OPTIONAL INFORMATI	This form compiles with current canyor ma statutes regarding notary wording and,
DESCRIPTION OF THE ATTACHED DOCUMENT	if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary
Addendum (Title or description of attached document)	law. State and County information must be the State and County where the document
(Title or description of attached document continued)	signer(s) personally appeared before the notary public for acknowledgment. Date of notarization must be the date that the signer(s) personally appeared which
Number of Pages 1 Document Date 1/24/18	 must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
	 Print the name(s) of document signer(s) who personally appear at the time of notarization.
CAPACITY CLAIMED BY THE SIGNER Individual (s)	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a
(Title) □ Partner(s)	sufficient area permits, otherwise complete a different acknowledgment form. • Signature of the notary public must match the signature on file with the office of
☐ Attorney-in-Fact ☐ Trustee(s)	the county clerk. Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
Other	 Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

• Securely attach this document to the signed document with a staple.

2015 Version www.NotaryClasses.com 800-873-9865

State of California

CALIFORNIA ALL- PURPOSE CERTIFICATE OF 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 Solano	_ }
On January 24, 2018 before me, _	N. Dang, Notary Public (Here insert name and title of the officer)
personally appeared Jerry G. Wicks	
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	instrument and acknowledged to me that
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which the person(s) acted, executed the	
the percentage desired, exceeding the	o modulinona
Leartify under DENALTY OF DED ILLD	Vundor the laws of the Ctate of Colifornia that
the foregoing paragraph is true and cor	Y under the laws of the State of California that
the foregoing paragraph is true and cor	ilect.
WITNESS may band and efficial and	yaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaaa
WITNESS my hand and official seal.	N. DANG NOTARY PUBLIC - CALIFORNIA COMMISSION # 2087225
Lunte	SOLANO COUNTY My Comm. Exp. October 23 2018
Notary Public Signature (No	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Notal grabite Signature (No	lotary Public Seal)
ADDITIONAL OPTIONAL INFORMATI	INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments
	from other states may be completed for documents being sent to that state so long
Building Maintenance Agreement	as the wording does not require the California notary to violate California notary law.
(Title or description of attached document)	 State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
(Title or description of attached document continued)	 Date of notarization must be the date that the signer(s) personally appeared which
	 must also be the same date the acknowledgment is completed. The notary public must print his or her name as it appears within his or her
Number of Pages 2 Document Date 1/24/18	 commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time of
	notarization.
CAPACITY CLAIMED BY THE SIGNER Individual (s)	 Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this
☐ Corporate Officer	 information may lead to rejection of document recording. The notary seal impression must be clear and photographically reproducible.
(Title)	Impression must not cover text or lines. If seal impression smudges, re-seal if a
(Title) □ Partner(s)	 sufficient area permits, otherwise complete a different acknowledgment form. Signature of the notary public must match the signature on file with the office of
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	. Jr

Indicate the capacity claimed by the signer. If the claimed capacity is a

corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

• Securely attach this document to the signed document with a staple.

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Other