

APN# 42-160-1A



00117895202009521240080080

KAREN ELLISON, RECORDER

Recording Requested by/Mail to:

Name: Joseph E. Selva III

Address: 9215 Mombacho RD.

City/State/Zip: Kelseyville CA 95451

Mail Tax Statements to:

Name: same

Address: _____

City/State/Zip: _____

Affidavit of Death of Joint Tenant

Title of Document (required)

----- (Only use if applicable) -----

The undersigned hereby affirms that the document submitted for recording DOES contain personal information as required by law: (check applicable)

Affidavit of Death – NRS 440.380(1)(A) & NRS 40.525(5)

Judgment – NRS 17.150(4)

Military Discharge – NRS 419.020(2)

Joseph E. Selva III
Signature

Joseph E. Selva III
Printed Name

This document is being (re-)recorded to correct document # _____, and is correcting

AFFIDAVIT OF DEATH OF JOINT TENANT

STATE OF California }

SS

COUNTY OF Lake }

BEFORE ME, the undersigned Notary Public, personally appeared, Joseph E. Selva Jr, "Affiant", who upon being duly sworn, deposes and states upon his or her oath or affirmation, the following:

1. My name is Joseph E. Selva Jr and I reside at 9215 Mombacho RD.

2. I owned real property as a joint tenant with Hazel m. White, such real property located in Douglas County, State of Nevada, described as follows:

See Attached Legal Description.

Title deed is recorded in Book _____, Page _____ in the office of the register of deeds in the county and state aforesaid.

3. Hazel m. White, my joint tenant identified above, departed this life on the 12th day of November, 2019. A copy of the death certificate of Hazel White is attached.

4. On the date of the death of _____, the above described real estate was owned by Joseph E. Selva Jr. and Hazel m. White, as joint tenants and the joint tenancy had not been severed by any act of the parties or by operation of law.

5. Affiant is the sole surviving joint tenant of the property described above.

Dated this the 5 day of Aug, 2017.


Affiant

Joseph E. Selva Jr.

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 Yuba

Subscribed and sworn to (or affirmed) before me on this 5th
day of August, 2017, by
Joseph E. Selva Jr
proved to me on the basis of satisfactory evidence to be the
person(s) who appeared before me

 MADELYN L. MARTINELLI
Commission # 2126811
Notary Public - California
Lake County
My Comm. Expires Oct 14, 2019



MADELYN L. MARTINELLI
Commission # 2126811
Notary Public - California
Lake County
My Comm. Expires Oct 14, 2019

Signature

Madelyn L. Martinelli

Affidavit of Death of
Joint Tenant

101 ✓ HAZEL M. WHITE, 9260 FAIRWAY DR. KELSEYVILLE, CA 95451

343041

MAIL TAX STATEMENT TO

SAME AS BELOW

WHEN RECORDED MAIL TO
JOSEPH EDWARD SELVA, JR.
9215 HOMBACHO ROAD
KELSEYVILLE, CA. 95451

-----Space Above Recorder's Use Only-----
Order/Escrow No.: 1994-6-25 L C N: GRANT DEED (INDIVIDUAL)

The undersigned grantor(s) declare(s): *4.55 RPTT*
Documentary transfer tax is \$ None - No Consideration
() Computed on full value of property conveyed, or
() Computed on full value less value of liens and encumbrances remaining at time of sale
(X) Unincorporated area () City of
Tax Parcel No.: 42-160-14

FOR A VALUABLE CONSIDERATION, receipt of which is hereby acknowledged, HAZEL M. WHITE, an unmarried woman

hereby GRANT(S) to JOSEPH EDWARD SELVA JR., an unmarried man and HAZEL M. WHITE, an unmarried woman, as Joint Tenants

the following described real property in the unincorporated area of the County of ~~DAKEX DOUGLAS~~, State of ~~California~~ Nevada:
A TIMESHARE ESTATE COMPRISED OF:

PARCEL ONE

An undivided 1/102nd interest in and to that certain condominium as follows:

(A) An undivided 1/20th interest as tenants-in-common, in and to Lot 33 as shown on Tahoe Village Unit No. 3-10th Amended Map, Recorded September 21, 1990 as Document No. 235008, Official Records of Douglas County, State of Nevada. Except therofrom Units 121 through 140 (inclusive) as shown and defined on that certain Condominium plan recorded August 20, 1982 as Document No. 70305 of Official Records, Douglas County, State of Nevada.

(B) Unit No. 126 as shown and defined on said last Condominium Plan.

(Continued)

Date: July 1, 1994

HAZEL M. WHITE
HAZEL M. WHITE

The instrument filed for record by Lake County Title Company is not a valid instrument unless the same is first recorded in the public records of the State of Nevada.

(See Page 2 over for Acknowledgement) 343041

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cgdl-u(5/94)

STATE OF CALIFORNIA)
) S.S.
County of LAKE)

On July 5, 1994, before me, the undersigned, a Notary Public in and for said County and State, personally appeared Hazel M. White

personally known to me (or 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.

WITNESS my hand and official seal.

Betty L. Doud
Notary Public in and for said
County and State



(Notary Seal)

STATE OF CALIFORNIA)
) S.S.
County of)

On , before me, the undersigned, a Notary Public in and for said County and State, personally appeared

personally known to me (or 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.

WITNESS my hand and official seal.

Notary Public in and for said
County and State

(Notary Seal)

MAIL TAX STATEMENT AS DIRECTED ABOVE

GRANT DEED

Order/Escrow No.: 1994-6-25

Legal Description (Continued)

PARCEL TWO

(A) A non-exclusive easement for roadway and public utility purposes as granted to Harich Tahoe developments in deed re-recorded December 8, 1981, as Document No. 63026, being over a portion of Parcel 26-A (described in Document No. 01112, recorded June 17, 1976) in Section 30, Township 13 North, Range 19 East M.D.B. & M.; and

(B) An easement for ingress, egress and public utility purposes, 32' wide, the centerline of which is shown and described on the Seventh Amended Map of Tahoe Village No. 3, recorded April 9, 1986, as Document No. 133178 of Official Records, Douglas County, State of Nevada.

PARCEL THREE

A non-exclusive right to use the real property known as "Common Area" as shown on Tahoe Village Unit No. 3-10th Amended Map, Recorded September 21, 1990 as Document No. 235008 of the Douglas County Recorder's Office, Douglas County, Nevada, within Section 30, Township 13 North, Range 19 East, M.D.B. & M. for all those purposes provided for in the Declaration of Covenants, Conditions, and Restrictions recorded January 11, 1973, as Document No. 63681, in book 173 Page 229 of Official Records and in modifications thereof: (1) recorded September 28, 1973 as Document No. 69063 in Book 973 Page 812 of Official Records; (2) recorded July 2, 1976, as Document No 1472 in Book 776 Page 87 of Official Records; and (3) recorded July 26, 1989, as Document No. 207446, in Book 789, Page 3011.

PARCEL FOUR

A non-exclusive easement for ingress and egress and recreational purposes and for the use and enjoyment and incidental purposes over, on and through Lots 29, 30, 35, 39, 40, and 41 as shown on Tahoe Village Unit No. 3-10th Amended Map, Recorded September 21, 1990 as Document No. 235008 of the Douglas County Recorder's Office, Douglas County, Nevada, within Section 30, Township 13 North, Range 19 East M.D.B. & M. for all those purposes provided for in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions, recorded February 14, 1984 as Document No. 96758 and as amended from time to time of Official Records of Douglas County, State of Nevada.

PARCEL FIVE

The exclusive right to use said UNIT and the non-exclusive right to use the real property referred to in subparagraph (A) of Parcel One and Parcels Two, Three, and Four above during ONE alternate "use week" during even numbered years during swing "use season", as said quoted terms are defined in the Fourth Amended and Restated Declaration of Covenants, Conditions and Restrictions of the Ridge Tahoe, recorded February 14, 1984, as Document No. 96758 of Official Records of Douglas county, State of Nevada.

The above described exclusive and non-exclusive rights may be applied to any available unit in Lots 31, 32, or 33 only during said alternate use week within said use season.

A Portion of APN 42-160-14

343041

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COPY

REQUESTED BY
Hazel White
IN OFFICIAL RECORDS OF
DOUGLAS CO., NEVADA.

'94 AUG -1 P12:01

SUZANNE BEAUDREAU
RECORDER

\$10⁰⁰ PAID ka DEPUTY

343041
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CERTIFICATION OF VITAL RECORD

CITY AND COUNTY OF SAN FRANCISCO

CERTIFICATE OF DEATH

3 1997 38 006038

STATE FILE NUMBER		STATE OF CALIFORNIA USE BLACK INK ONLY/NO ERASURES, WHITEOUTS OR ALTERATIONS VS-11 (REV. 1/96)				LOCAL REGISTRATION NUMBER	
1. NAME OF DECEDENT—FIRST (GIVEN) HAZEL		2. MIDDLE CAVELLO		3. LAST (FAMILY) WHITE			
4. DATE OF BIRTH MM/DD/CCYY 01/16/1935		5. AGE YRS. 62		6. SEX F		7. DATE OF DEATH MM/DD/CCYY 11/12/1997	
8. HOUR 2003		9. STATE OF BIRTH WA		10. SOCIAL SECURITY NO. -0152		11. MILITARY SERVICE <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
12. MARITAL STATUS Widowed		13. EDUCATION—YEARS COMPLETED 10		14. RACE White		15. HISPANIC—SPECIFY <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
16. USUAL EMPLOYER Self Employed		17. OCCUPATION Book Keeper		18. KIND OF BUSINESS Restaurant		19. YEARS IN OCCUPATION 10	
20. RESIDENCE—STREET AND NUMBER OR LOCATION 9260 Fairway Dr							
21. CITY Kelseyville		22. COUNTY Lake		23. ZIP CODE 95451		24. YRS IN COUNTY 22	
25. STATE OR FOREIGN COUNTRY CA		26. NAME, RELATIONSHIP Antol Feher - Son					
27. MAILING ADDRESS (STREET AND NUMBER OR RURAL ROUTE NUMBER, CITY OR TOWN, STATE, ZIP) 6600 Montecito Blvd#58, Santa Rosa, CA 95409							
28. NAME OF SURVIVING SPOUSE—FIRST -		29. MIDDLE -		30. LAST (MAIDEN NAME) -			
31. NAME OF FATHER—FIRST Anthony		32. MIDDLE Joseph		33. LAST Cavello		34. BIRTH STATE NY	
35. NAME OF MOTHER—FIRST Anna		36. MIDDLE Rose		37. LAST (MAIDEN) Reidl		38. BIRTH STATE Austria	
39. DATE MM/DD/CCYY 11/19/1997		40. PLACE OF FINAL DISPOSITION RES: Antol Feher, 6600 Montecito Blvd#58, Santa Rosa, CA 95409					
41. TYPE OF DISPOSITION(S) CR/RES		42. SIGNATURE OF ENBALMER Not Embalmed				43. LICENSE NO. -	
44. NAME OF FUNERAL DIRECTOR Neptune Society of No Ca		45. LICENSE NO. FD 1306		46. SIGNATURE OF LOCAL REGISTRAR <i>W. Smith</i>		47. DATE MM/DD/CCYY 11/19/1997	
101. PLACE OF DEATH UCSF MEDICAL CENTER		102. IF HOSPITAL, SPECIFY ONE: <input checked="" 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 SAN FRANCISCO	
105. STREET ADDRESS—STREET AND NUMBER OR LOCATION 505 PARNASSUS AVENUE		106. CITY SAN FRANCISCO					
107. DEATH WAS CAUSED BY: (ENTER ONLY ONE CAUSE PER LINE FOR A, B, C, AND D)		TIME INTERVAL BETWEEN ONSET AND DEATH		108. DEATH REPORTED TO CORONER			
IMMEDIATE CAUSE (A) ASPIRATION PNEUMONIA		1 WK		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO NC97-2337			
DUE TO (B) LEFT MIDDLE CEREBRAL ARTERY STROKE		1 WK		109. BIOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (C) SUB-ARACHNOID HEMORRHAGE		1 WK		110. AUTOPSY PERFORMED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
DUE TO (D)				111. USED IN DETERMINING CAUSE <input type="checkbox"/> YES <input type="checkbox"/> NO			
112. OTHER SIGNIFICANT CONDITIONS CONTRIBUTING TO DEATH BUT NOT RELATED TO CAUSE GIVEN IN 107 NO							
113. WAS OPERATION PERFORMED FOR ANY CONDITION IN ITEM 107 OR 112? IF YES, LIST TYPE OF OPERATION AND DATE. COILING OF ANTERIOR COMMUNICATION ARTERY ANEURYSM 10/28/1997							
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 D / C C Y Y 10/27/1997		115. SIGNATURE AND TITLE OF CERTIFIER <i>W. Smith</i>		116. LICENSE NO. G71583		117. DATE MM/DD/CCYY 11/13/1997	
DECEDENT LAST BEEN ALIVE M M / D D / C C Y Y 11/12/1997		118. TYPE ATTENDING PHYSICIAN'S NAME, MAILING ADDRESS, ZIP WADE SMITH, M.D., 505 PARNASSUS AVE, SF CA 94143					
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 MM/DD/CCYY		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. #	
						CENSUS TRACT	

3802177894

CERTIFIED COPY OF VITAL RECORDS
STATE OF CALIFORNIA, CITY AND COUNTY OF SAN FRANCISCO

This is to certify that the image reproduced hereupon is a true copy of the record on file in the SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH as of the date issued.

DATE ISSUED

09/23/1998

This copy is not valid unless prepared on an engraved border, displaying the date, seal and signature of the City and County Health Officer.

Mitchell Katz
Mitchell Katz, M.D.
Health Officer and Local Registrar

