

APN _____

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APN _____



OFFICIAL RECORD
AMY ELMER, RECORDER

TRANSFER TITLE AFFIDAVIT - TL-100

Title of Document

Affirmation Statement

I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does not contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of any person or persons. (Per NRS 239B.030)

I, the undersigned hereby affirm that the attached document, including any exhibits, hereby submitted for recording **does contain** the social security number, driver's license or identification card number, or any "Personal Information" (as defined by NRS 603A.040) of a person or persons as required by law: _____
(State specific law)

Donald Rasmussen
Signature Title

DONALD RASMUSSEN
Print

8/18/2020
Date

Grantees address and mail tax statement:

PO BOX 697
PIOCHE, NV 89043

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

TRANSFER TITLE AFFIDAVIT (TL-100)

Applicant Email Address (required): DONRASMUSSON5@GMAIL.COM
Applicant Phone Number (required): 775-962-2467 /

Type of Transaction: _____ Transfer _____ Change to the Current Record

SECTION 1. DESCRIPTION OF THE STRUCTURE

Year: 2006 Manufacturer: NASHUA HOMES & PARK Model: 545
Serial # NN1D41604AB Size: _____
Physical Location: 557 JORDYN LN Pioche, NV 89043

SECTION 2. OWNER AND LIENHOLDER INFORMATION

Current Owner(s): RASMUSSON FAMILY TRUST

Mailing Address: P.O. BOX 697
City Pioche State NV Zip 89043

Current Lienholder (If Any): N/A
Mailing Address: _____
City _____ State _____ Zip _____

SECTION 3. TRUST APPOINTMENT & POWERS

TRUSTEE
I/We, DONALD E. RASMUSSON

Declare that I/we have been appointed as the trustee(s)
of RASMUSSON FAMILY TRUST

And have the powers granted as trustee(s) to sign for the transfer of the above described structure.
I/We the trustee(s) jointly and severally indemnify the Nevada Housing Division, and hold the Nevada Housing Division and the State of Nevada harmless from any liability on the account of the issuance of a title on said structure as aforesaid.

SUCCESSOR TRUSTEE
I/We, SHARON E. RASMUSSON

Declare that I/we have been appointed as the successor trustee(s) of RASMUSSON FAMILY TRUST

And have the powers granted as successor trustee(s) to sign for the transfer of the above described structure.
I/We the trustee(s) jointly and severally indemnify The Nevada Housing Division, and hold the Nevada Housing Division and the State of Nevada harmless from any liability on the account of the issuance of a title on said structure as aforesaid.

SECTION 4. STATEMENT OF FACTS (BILL OF SALE)

(I, We) as seller further state that to (my, our) knowledge, the structure is free and clear of any liens, encumbrances, lawful claims and demands of any person whatsoever, and that the structure is not involved in any existing or pending litigation. That in consideration of \$ 5 and other valuable consideration, the receipt whereof is hereby acknowledged, the undersigned (SELLER) does hereby sell, transfer and deliver on the _____ day of _____, 20____ his/her right, title and interest in the above described structure to the following purchaser.

SECTION 5. NEW OWNER(S) (Please print clearly and legibly all names to be shown on the title)

That (I, we) have good right and lawful authority to request the Division to issue a title on said structure to:

New Owner(s) RASMUSSEN FAMILY TRUST DONALD C RASMUSSEN, TRUSTEE

Select the appropriate vesting:

_____ JTWROS; _____ OR, _____ AND

Mailing Address: PO BOX 697
City Pioche State NV Zip 89043

SECTION 6. NEW LIENHOLDER

New Lienholder: N/A

Mailing Address: _____
City _____ State _____ Zip _____

The statements and declarations herein contained are for the specific purpose of inducing said Division to issue a Certificate of Ownership; that (I, we) shall and will assume, fully pay, satisfy and discharge any and all liens, claims or encumbrances disclosed herein or any others that may be shown or proved to be upon or against said structure and indemnify and hold harmless said Division and the State of Nevada on account of the issuance of said Certificate of Ownership on said structure as aforesaid.

SECTION 7. SIGNATURES AND NOTARIZATION (Do not sign until in front of a Notary)

Donald C Rasmussen, Trustee RASMUSSEN FAMILY TRUST
Signature of Owner/Seller (s) Signature of Purchaser (s)

Signature of Owner/Seller (s) Signature of Purchaser (s)

Signature of Lienholder (s) Signature of Purchaser (s)

(For Notary use only)

State of NV County Lincoln

Subscribed and sworn to before me,
Shannon M. Simpson
(Name of Notary Public)

on this 18th day of August, 2020
by Donald Charles Rasmussen

(Printed name of party appearing before Notary)

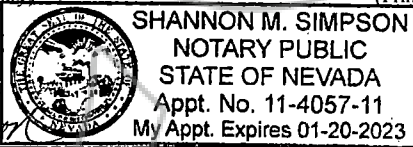
State of _____ County _____

Subscribed and sworn to before me,

(Name of Notary Public)

on this _____ day of _____, 20____
by _____

(Printed name of party appearing before Notary)



Shannon M. Simpson
Notary Public Signature Notary Stamp or Seal

Notary Public Signature Notary Stamp or Seal

SECTION 8. COUNTY ENDORSEMENT

WARNING - Endorsement required by county assessor where structure is situated that all taxes have been paid before title can be transferred.

Cydney D. Dwyer Deputy Date: 8-18-2020 For Tax Year 2020-2021
Signature of County Assessor