

LINCOLN COUNTY, NV

2024-166924

\$37.00

Rec:\$37.00

05/22/2024 11:12 AM

MONUMENT TITLE INSURANCE, INC.

Pgs=6 AE

OFFICIAL RECORD

AMY ELMER, RECORDER

RECORDING COVER PAGE

(Must be typed or printed clearly in BLACK ink only and avoid printing in the 1" margins of document)

APN# 013-041-24

TITLE OF DOCUMENT

(DO NOT Abbreviate)

Affidaviddt of Conversion to Real Property TL-110

Re-record to add information to Section 5

Document Title on cover page must appear EXACTLY as the first page of the document to be recorded.

RECORDING REQUESTED BY:

Monument Title Insurance Inc

RETURN TO: Name Monument Title Insurance Inc

Address 999 E Murray Holladay Rd #106

City/State/Zip SLC, UT 84117

MAIL TAX STATEMENT TO: (Applicable to documents transferring real property)

Name _____

Address _____

City/State/Zip _____

This page provides additional information required by NRS 111.312 Sections 1-2.
To print this document properly, do not use page scaling.

APN# 013-041-24

(Must match APN# on document to be Recorded)

Department of Business and Industry
Nevada Housing Division
Manufactured Housing

Affidavit of Conversion
to Real Property (TI-110)

County of Lincoln

This document has been recorded electronically.
Please see the attached copy to view the County
Recorder's stamp as it now appears in the public
record.

Submitted by: Monument Title Insurance, Inc.
Entry No. 2024-16678

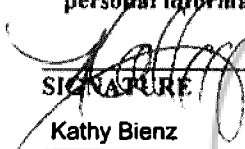
RECORDING COVER PAGE
(Must be Typed or Printed legibly in black
ink only. Do Not Print in 1" margins of
this document)

Above Space for Recorder's Use ONLY

TITLE OF DOCUMENT:
AFFIDAVIT OF CONVERSION TO REAL PROPERTY TL-110
(Must match Title on document to be Recorded)

Please complete Affirmation Statement below:

I, the undersigned, hereby affirm that this document submitted for recording does not contain any
personal information and/or social security number of any person or persons (Per NRS 239B.030



EO

SIGNATURE

TITLE

Kathy Bienz

PRINT NAME

RECORDING REQUESTED BY:

Monument title Insurance Inc

Name

RETURN TO: Name: Monument Title Insurance inc

Address: 999 E Murray Holladay Rd #106 SLC UT 84117
Street City State Zip Code

MAIL TAX STATEMENT TO: (Applicable to documents transferring real property)

Name: Anthony R & Deborah Adams

Address: PO Box 823 Callente NV 89008
Street City State Zip Code

**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

AFFIDAVIT OF CONVERSION TO REAL PROPERTY (TL-110)

Applicant Email Address (required): adamsfmlynv@yahoo.com / _____

Applicant Phone Number (required): 702-241-6643 / _____

SECTION 1. DESCRIPTION OF THE STRUCTURE (Personal Property)

Year: 2022 Manufacturer: CHAMPION HOME BUILDERS INC Model: CM-4603D

Serial # 009-00P-H-A005358AB Size: A:720" X 160" B: 684" X 160"

Manufacturer's Certificate of Origin #: _____ (If available) Insignia No.: _____ (If available)

Physical Location: 3035 Sharon Street Caliente NV 89008
Street City State Zip Code

SECTION 2. DESCRIPTION OF REAL PROPERTY (Land)

Assessor Parcel Number (APN): 013-041-24

Legal Description: _____

LOT 31 HIGHLAND KNOLLS SUBDIVISION

SECTION 3. PERSONAL PROPERTY (Manufactured Home)

Owner/Buyer(s): Anthony R Adams SR & Deborah Adams E-Mail Address: adamsfmlynv@yahoo.com

[Land Must be owned by Owner of the Manufactured Home unless land is leased per NRS 361.244.1.B]

Mailing Address: PO Box 823 City Caliente State NV Zip 89008

Current Lienholder (If Any): Academy Mortgage Corporation

Mailing Address: 320 E 600 S City St George State UT Zip 84770

Assessor's Office Manufactured Home Account# _____ (Assessor's Office)

SECTION 4. LEASED REAL PROPERTY (LAND) (If Real Property Land is Leased in accordance with NRS 361.244.1.B)

Land Owner(s): _____ E-Mail Address: _____

Mailing Address: _____ City _____ State _____ Zip _____

Current Lienholder (If Any): _____

Mailing Address: _____ City _____ State _____ Zip _____

SECTION 5. ENFORCEMENT AGENCY ISSUING PERMIT & CERTIFICATE OF OCCUPANCY (If Applicable)

Enforcement Agency: Housing Division Agency Official Name: Clytle

Agency Official's Email: _____ Phone Number: 702-241-6643

Building Permit No.: 0684 (If Applicable) **Permanent Foundation System Installation**

Installation Seal No.: _____ Agency Official Signature: _____

[This document is evidence that the indicated Enforcement Agency has Issued a Certificate of Occupancy for installation of the Permanent Foundation System for the unit upon the real property, both as described herein, as of the date of recording by the County Recorder. When recorded, this document (Form TL-110) shall be submitted to the Nevada Housing Division].

SECTION 6. DEALER INFORMATION (If a Dealer was involved in the sale of the manufactured home)

Dealer Name: Craftsman Homes LLC Dealer License No.: D-5070 E-Mail: don@forahouse.com

Mailing Address: PO Box 7038 City Reno State NV Zip 89511

Note: A Copy of the Dealer Report of Sale (DRS) may be attached to this TL-110 Form

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

The undersigned, as owner(s)/buyer(s) of the above described manufactured/mobile home and real property (unless leased as indicated in Section 4. and financed in accordance with NRS 361.244.1.B), affirm that the running gear has been removed per NRS 361.244, the home has been installed in accordance with all state and local building codes and agree(s) to the conversion of the above described home to real property, understanding that any liens or encumbrances on the unit may become a lien on the land.

I, the undersigned, hereby affirm that this document submitted for recording does not contain any personal information

[Signature]
Signature of Manufactured Homeowner/Buyer (s)

Anthony R Adams Sr
Print Name

Signature of Landowner (s) (If Leased)

Print Name

Signature of Lienholder (s) (If Any)

Print Name

[Signature]
Signature of Manufactured Homeowner/Buyer (s)

Deborah Adams
Print Name

Signature of Landowner (s) (If Leased)

Print Name

Signature of Lienholder (s) (If Any)

Print Name

(FOR NOTARY USE ONLY)

State of NV County Lincoln
Subscribed and sworn to before me,

Brittany Young
(Name of Notary Public)

on this 12 day of January, 2024

by Anthony R Adams Sr

(Printed name of party appearing before Notary)

State of NV County Lincoln
Subscribed and sworn to before me,

Brittany Young
(Name of Notary Public)

on this 12 day of January, 2024

by Deborah Adams

(Printed name of party appearing before Notary)

Brittany Young
Notary Public Signature



Brittany Young
Notary Public Signature



[This document is evidence that the indicated Enforcement Agency has issued a Certificate of Occupancy for installation of the Permanent Foundation System for the unit upon the real property, both as described herein, as of the date of recording by the County Recorder. When recorded, this document (Form TL-110) shall be submitted to the Nevada Housing Division].

SECTION 6. DEALER INFORMATION (If a Dealer was involved in the sale of the manufactured home)

Dealer Name: Craftsman Homes LLC Dealer License No.: D5070 E-Mail: don@forahouse.com

Mailing Address: PO Box 7036 City Reno State NV Zip 89511

Note: A Copy of the Dealer Report of Sale (DRS) may be attached to this TL-110 Form

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

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I, the undersigned, hereby affirm that this document submitted for recording does not contain any personal information

Signature of Manufactured Homeowner/Buyer (s)

Anthony R Adams Sr

Print Name

Signature of Manufactured Homeowner/Buyer (s)

Deborah Adams

Print Name

Signature of Landowner (s) (If Leased)

Print Name

XX

Signature of Lienholder (s) (If Any)

XX

Print Name

Signature of Landowner (s) (If Leased)

Print Name

Signature of Lienholder (s) (If Any)

Print Name

(FOR NOTARY USE ONLY)

State of Utah County Washington
Subscribed and sworn to before me,

Rob Grim

(Name of Notary Public)

on this 11th day of January, 2024

by Lee Ellen Briggs

(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 _____

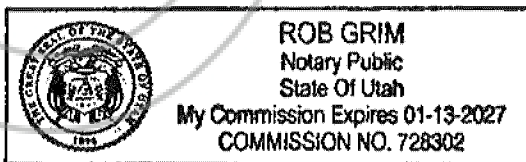
(Printed name of party appearing before Notary)

[Signature]
Notary Public Signature

Notary Stamp or Seal

Notary Public Signature

Notary Stamp or Seal



SECTION 8. AUTHORIZATION BY COUNTY ASSESSOR [NRS 361.244]

Cydney Dwyer
County Assessor Signature

4-9-2024
Date

Cydney Dwyer
Print Name

Personal property taxes must be paid in full for the current year. All documents relating to the manufactured home must be surrendered to the Nevada Housing Division. This conversion is not valid until issuance of a "Real Property Notice" to the assessor's office. The manufactured house will then be placed on the next succeeding tax roll as real property.

When Recorded Mail To: _____
Street City State Zip

Distribution: ORIGINAL to Nevada Housing Division
COPY to Lien holder or Owner/Buyer
E-MAIL to Lien holder, Owner/Buyer and Landowner

