

2009 060114

2009 SEP -1 AM 9:06

MICHAEL A. BROWN  
RECORDER

**MANUFACTURED HOME AFFIDAVIT OF AFFIXATION**

620092479

Record and Return [ ] by Mail [ ] by Pickup to:

WFHM FINAL DOCS X2599-024

405 SW 5TH STREET

DES MOINES, IA 50309-4600

This Instrument Prepared By:

LEAH RASMUSSEN

Preparer's Name

7745 OFFICE PLAZA DR N,

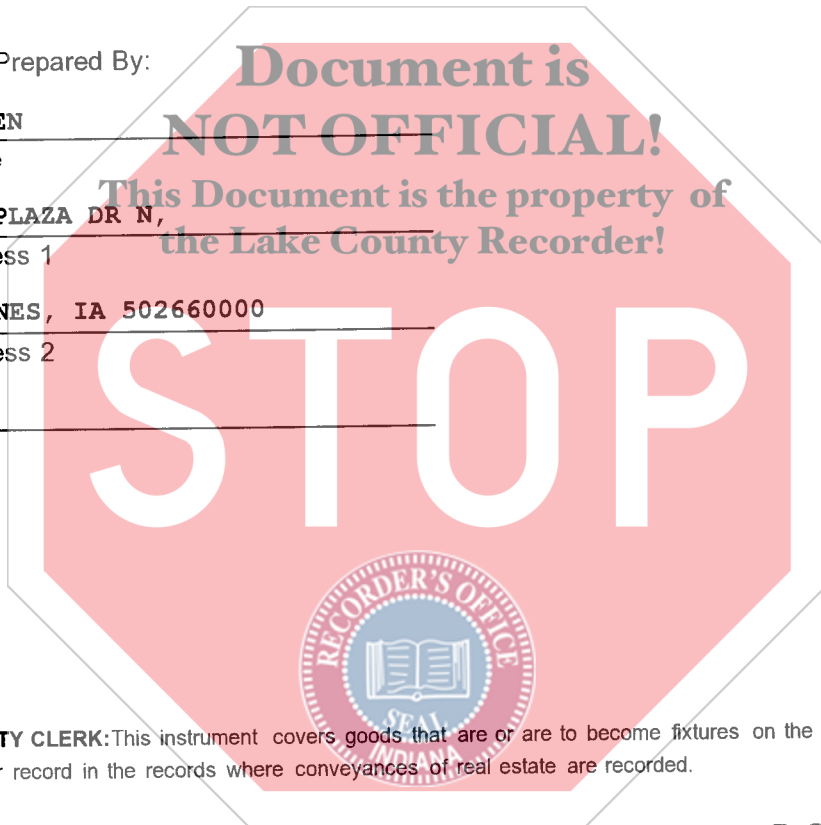
Preparer's Address 1

WEST DES MOINES, IA 502660000

Preparer's Address 2

0104193933

Loan Number



Ontario Title Insurance Company

**ATTENTION COUNTY CLERK:** This instrument covers goods that are or are to become fixtures on the Land described herein and is to be filed for record in the records where conveyances of real estate are recorded.

**FILED**

AUG 31 2009

PEGGY HOLINGA KATONA  
LAKE COUNTY AUDITOR

016126

et  
19-  
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WALTER E TAYLOR  
KATHLEEN M TAYLOR

[type the name of each Homeowner signing this Affidavit]:  
being duly sworn, on his or her oath state as follows:

1. Homeowner owns the manufactured home ("Home") described as follows:

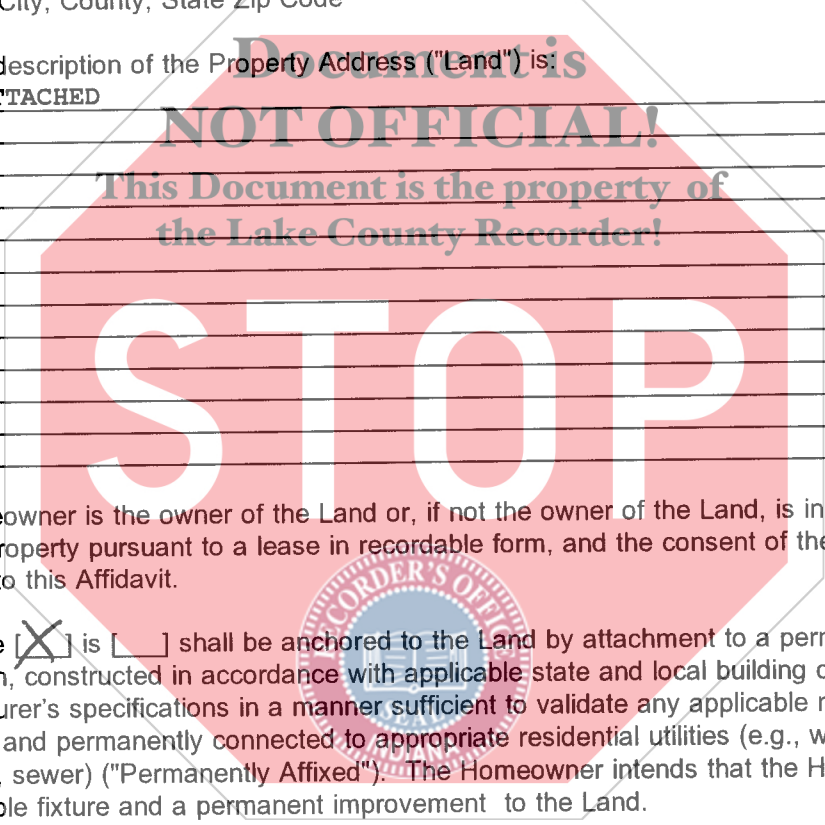
New/Used	Year	Manufacturer's Name	Model Name or Model No.	Length x Width
USED	1999	COMMODORE	MC504A	052 x 024
GX-07227		GX-07227		
Serial No.		Serial No.	Serial No.	Serial No.

2. The Home was built in compliance with the federal Manufactured Home Construction and Safety Standards Act.

3. If the Homeowner is the first retail buyer of the Home, Homeowner is in receipt of (i) the manufacturer's warranty for the Home, (ii) the Consumer Manual for the Home, (iii) the Insulation Disclosure for the Home, and (iv) the formaldehyde health notice for the Home.

4. The Home is or will be located at the following "Property Address":  
**14340 COUNTY LINE ROAD, HEBRON, LAKE, IN 46341**  
Street or Route, City, County, State Zip Code

5. The legal description of the Property Address ("Land") is:  
**PLEASE SEE ATTACHED**

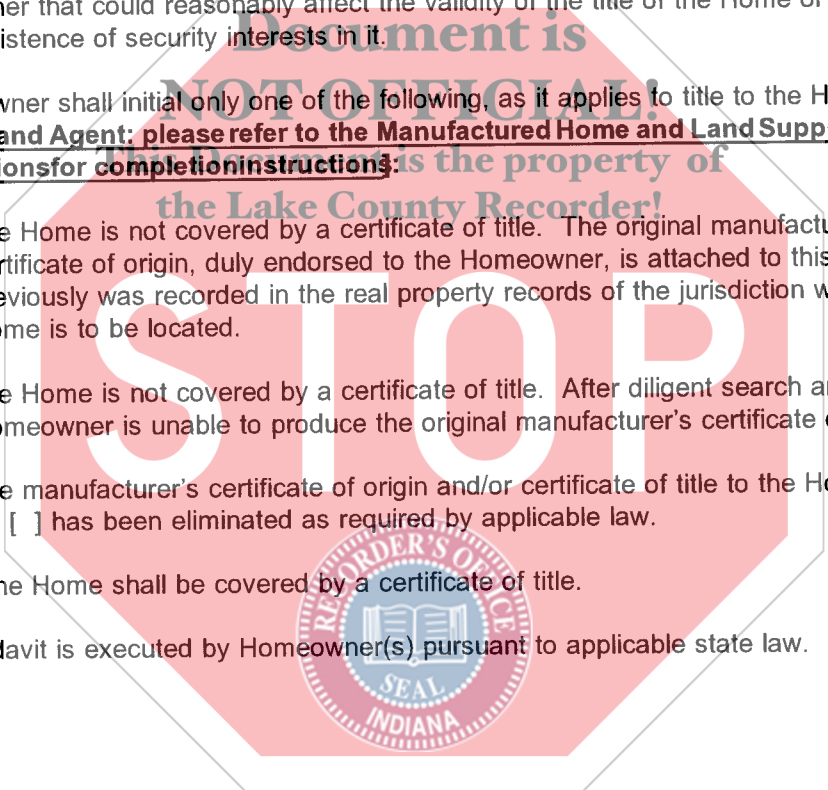


6. The Homeowner is the owner of the Land or, if not the owner of the Land, is in possession of the real property pursuant to a lease in recordable form, and the consent of the lessor is attached to this Affidavit.

7. The Home  is  shall be anchored to the Land by attachment to a permanent foundation, constructed in accordance with applicable state and local building codes and manufacturer's specifications in a manner sufficient to validate any applicable manufacturer's warranty, and permanently connected to appropriate residential utilities (e.g., water, gas, electricity, sewer) ("Permanently Affixed"). The Homeowner intends that the Home be an immoveable fixture and a permanent improvement to the Land.

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8. The Home shall be assessed and taxed as an improvement to the Land.
9. Homeowner agrees that as of today, or if the Home is not yet located at the Property Address, upon the delivery of the Home to the Property Address:
- (a) All permits required by governmental authorities have been obtained;
  - (b) The foundation system for the Home was designed by an engineer to meet the soil conditions of the Land. All foundations are constructed in accordance with applicable state and local building codes, and manufacturer's specifications in a manner sufficient to validate any applicable manufacturer's warranty.
  - (c) The wheels, axles, towbar or hitch were removed when the Home was, or will be, placed on the Property Address; and
  - (d) The Home is (i) Permanently Affixed to a foundation, (ii) has the characteristics of site-built housing, and (iii) is part of the Land.
10. If the Homeowner is the owner of the Land, any conveyance or financing of the Home and the Land shall be a single transaction under applicable state law.
11. Other than those disclosed in this Affidavit, the Homeowner is not aware of (i) any other claim, lien or encumbrance affecting the Home, (ii) any facts or information known to the Homeowner that could reasonably affect the validity of the title of the Home or the existence or non-existence of security interests in it.
12. A Homeowner shall initial only one of the following, as it applies to title to the Home:  
**[Closing and Agent; please refer to the Manufactured Home and Land Supplemental Closing Instructions for completion instructions]:**
- The Home is not covered by a certificate of title. The original manufacturer's certificate of origin, duly endorsed to the Homeowner, is attached to this Affidavit, or previously was recorded in the real property records of the jurisdiction where the Home is to be located.
  - The Home is not covered by a certificate of title. After diligent search and inquiry, the Homeowner is unable to produce the original manufacturer's certificate of origin.
  - The manufacturer's certificate of origin and/or certificate of title to the Home  shall be  has been eliminated as required by applicable law.
  - The Home shall be covered by a certificate of title.
13. This Affidavit is executed by Homeowner(s) pursuant to applicable state law.



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IN WITNESS WHEREOF, Homeowner(s) has executed this Affidavit in my presence and in the presence of the undersigned witnesses on this 21st day of August, 2009.

Walter E Taylor  
Homeowner #1 (SEAL) \_\_\_\_\_ Witness  
**WALTER E TAYLOR**

Kathleen M Taylor  
Homeowner #2 (SEAL) \_\_\_\_\_ Witness  
**KATHLEEN M TAYLOR**

\_\_\_\_\_  
Homeowner #3 (SEAL) \_\_\_\_\_ Witness

\_\_\_\_\_  
Homeowner #4 (SEAL) \_\_\_\_\_ Witness

STATE OF Indiana )  
 ) ss.:  
COUNTY OF Jasper )

On the 21st day of August in the year 2009  
before me, the undersigned, a Notary Public in and for said State, personally appeared Walter E. Taylor and Kathleen M. Taylor  
personally known to me or proved to me on the basis of satisfactory evidence to be the individual(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 capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person on behalf of which the individual(s) acted, executed the instrument.

Traci R Hurst  
Notary Signature \_\_\_\_\_ Notary Printed Name \_\_\_\_\_

Notary Public, State of \_\_\_\_\_ Qualified in the County of \_\_\_\_\_

My Commission expires: \_\_\_\_\_

Official Seal:



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This instrument prepared by:  
Page 4 of 5 Leah Rasmussen  
NMFL # 7111 (MAHA) Rev 2/4/2008

**I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.**  
**Traci Hurst**

No: 620092479

## LEGAL DESCRIPTION

The South 263.67 feet of the Northeast 1/4 of the Southeast 1/4 of the Northeast 1/4 of Section 33, Township 34 North, Range 7 West of the 2nd Principal Meridian, in Lake County, Indiana.

