STATE OF SOUTH CAROLINA)
) MANUFACTURED HOME
COUNTY OF JASPER) AFFIDAVIT FOR RETIREMENT OF TITLE CERTIFICATE

(1) Name of Owner:_____

(2) Description of Manufactured Home:

Date of Manufacture: _____

Manufacturer: _____

Model year: _____ Make: _____

Width: _____ Length: _____

Identification Number (VIN): _____

(3) Check whichever is applicable:

_____The above described manufactured home is not subject to a security lien.

_____The above described manufactured home is subject to a security lien and a separate affidavit, as required by law, will be filed naming the secured parties.

(4) Full legal description of the property to which the manufactured home is currently, or is to be, affixed using metes and bounds or reference to recorded plat by book and page. (A separate sheet identified as 'Exhibit A' may be attached.)

(5) Derivation: This being the identical or a portion of property conveyed or leased to the owner by deed or lease from _____ and recorded _____ in Book _____ at page _____.

Tax map number _____

Tax billing address _____

(6) The above-described manufactured home is permanently affixed or is to be permanently affixed to the above-described real property and the title certificate is to be retired in accordance with applicable law.

(7) Check if applicable:

_____The owner of the manufactured home owns or has a leasehold estate of thirty-five or more years in the real property to which the manufactured home is affixed.

(8) WARNING: the execution and filing of this affidavit transfers ownership of the manufactured home to the lawful owner of the real property to which it is affixed.

The owner certifies that the above information provided by the owner is true and correct to the best information and belief of the owner.

Date: _____

Signature of owner: _____

Type or print name of owner: _____

Witness: _____

Witness: _____

STATE OF SOUTH CAROLINA)
COUNTY OF _____) ACKNOWLEDGEMENT

I, the undersigned Notary Public, do hereby certify that the foregoing instrument was acknowledged before me this ___ day of _____,20___ and the document was executed by the above name _____of he/her own free will.

Witness my hand and seal this ___ day of _____ , 20__

_____

Notary Public for South Carolina

My Commission Expires:_____