DECLARATION OF HOMESTEAD

Assessor's Parcel Number (APN):	_ or
Assessor's Manufactured Home ID Number:	
Recording Requested by and Mail to:	
Name:Address:	
City/State/Zip:	
Check One: Married (filing jointly) Widowed Single Person Multiple Single Person By Wife (filing jointly for benefit of both) Other (describe):	Head of Family Husband (filing jointly for benefit of both)
Check One: ☐ Regular Home Dwelling/Manufactured Home ☐ Con Name on Title of Property:	dominium Hotel
do individually or severally certify and declare as follows:	
is/are now residing on the land, premises (or manufactured, county of	
more particularly described as follows: (set forth legal description)	ription and commonly known street address or
I/We claim the land and premises hereinabove described, to appurtenances, or the described manufactured home as a H In witness, Whereof, I/we have hereunto set my/our hands	omestead.
Signature	Signature
Print or type name here	Print or type name here
STATE OF NEVADA, COUNTY OF	This instrument was acknowledged before
me on (date)	Notary Seal
By	·
By Person(s) appearing before notary By	
Person(s) appearing before notary	
Signature of notarial officer	

CONSULT AN ATTORNEY IF YOU DOUBT THIS FORM FITS YOUR PURPOSE. NOTE: Do not write in 1-inch margin. Revised Aug. 2019