

**If this document contains any restriction based on age, race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, familial status, marital status, disability, veteran or military status, genetic information, national origin, source of income as defined in subdivision (p) of Section 12955, or ancestry, that restriction violates state and federal fair housing laws and is void, and may be removed pursuant to Section 12956.2 of the Government Code by submitting a “Restrictive Covenant Modification” form, together with a copy of the attached document with the unlawful provision redacted to the county recorder’s office. The “Restrictive Covenant Modification” form can be obtained from the county recorder’s office and may be available on its internet website. The form may also be available from the party that provided you with this document. Lawful restrictions under state and federal law on the age of occupants in senior housing or housing for older persons shall not be construed as restrictions based on familial status. Gov. Code Sec. 12956.1(b)(1)**

Any person who believes that this document contains an unlawful restrictive covenant as described above may submit to the County Recorder a completed Restrictive Covenant Modification form. A complete copy of the original document must be attached to the Restrictive Covenant Modification form, with the unlawful language redacted. After submission to the Recorder, the form and attached document will be reviewed by County Counsel, and if the attached document properly redacts an unlawful covenant, the form and attached document will be recorded. If you submit a request to record a modification document, you must provide a return address in order for the County Recorder to notify you of the action taken by the County Counsel regarding the form. Gov. Code Sec. 12956.2(a)(1), (b)(1), (c)

RECORDING REQUESTED BY:

WHEN RECORDED MAIL TO:

THIS SPACE FOR RECORDER'S USE ONLY

### RESTRICTIVE COVENANT MODIFICATION

The following reference document contains a restriction based on age, race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, familial status, marital status, disability, veteran or military status, genetic information, national origin, source of income as defined in Section 12955 of the Government Code, or ancestry, that violates state and federal fair housing laws and is void. Pursuant to Section 12956.2 of the Government Code, this document is being recorded solely for the purpose of redacting and eliminating that restrictive covenant as shown on page(s) \_\_\_ of the document recorded on \_\_\_\_\_(date) in book \_\_\_\_\_ and page \_\_\_\_\_ or instrument number \_\_\_\_\_ of the official records of the County of \_\_\_\_\_, State of California.

Attached hereto is a true, correct and complete copy of the document referenced above, with the unlawful restrictive covenant redacted.

This modification document shall be indexed in the same manner as the original document being modified, pursuant to subdivision (d) of Section 12956 of the Government Code.

The effective date of the terms and conditions of the modification document shall be the same as the effective date of the original document.

Signature of Submitting Party: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_

\_\_\_\_\_ County Counsel, or their designee, pursuant to paragraph (1) of subdivision (b) of Section 12956.2 of the Government Code, hereby states that it has determined that the original document referenced above contains an unlawful restriction and this modification may be recorded.

Or

\_\_\_\_\_ County Counsel, or their designee, pursuant to paragraph (1) of subdivision (b) of Section 12956.2 of the Government Code, finds that the original document does not contain an unlawful restriction, or the modification document contains modifications not authorized, and this modification may not be recorded.

\_\_\_\_\_  
County Counsel

By:

Date:

42841

RECORDED IN OFFICIAL RECORDS  
OF SHASTA COUNTY, CALIFORNIA

20 MIN. PAST 11A M

DEC 4 1995

*Cris Anderson*  
RECORDING FEES B. B.

RECORDING REQUESTED BY:  
CHICAGO TITLE COMPANY

WHEN RECORDED RETURN TO:

Mr. & Mrs. Michael E. Stevens  
9058 Silver King Road  
Redding, CA 96001

#MSC1295-01

AMENDMENT TO THOSE CERTAIN  
PROTECTIVE COVENANTS AND RESTRICTIONS  
FOR

SILVER KING HILLS SUBDIVISION  
AS PER MAP RECORDED JANUARY 4, 1977  
IN BOOK 14 OF MAPS AT PAGE 138, SHASTA COUNTY RECORDS

WHEREAS, MICHAEL E. STEVENS AND HILDA A. STEVENS, AS SUBDIVIDER DID RECORD THOSE CERTAIN DECLARATION OF RESTRICTIONS FOR THE ABOVE SUBDIVISION MARCH 10, 1977 IN BOOK 1405 OF OFFICIAL RECORDS AT PAGE 276.

AND WHEREAS THE PRESENT OWNERS OF SAID SUBDIVISION DESIRE TO AMEND PARAGRAPH "2" AS CONTAINED IN SAID PROTECTIVE COVENANTS AND RESTRICTIONS.

NOW THEREFORE, SAID PROTECTIVE COVENANTS AND RESTRICTIONS PARAGRAPH "2" IS TO READ AS FOLLOWS:

"DWELLING QUALITY AND SIZE: IN NO EVENT SHALL ANY MOBILE HOME OR PORTION THEREOF, NOR ANY MODULAR OR FACTORY-BUILT HOUSE BE PLACED, CONSTRUCTED OR PERMITTED TO REMAIN ON ANY LOT. THE INTERIOR FLOOR SPACE OF ANY RESIDENTIAL STRUCTURE ERECTED, PLACED OR PERMITTED TO REMAIN ON SAID LOT SHALL BE NOT LESS THAN 1850 SQUARE FEET, EXCLUDING ALL EXTERIOR PORCHES, GARAGES AND OUTBUILDINGS."

ALL OTHER PROVISIONS OF SAID DECLARATION OF RESTRICTIONS SHALL REMAIN IN FULL FORCE AND EFFECT.

DATED: Dec 4 1995

OWNERS:

*Michael Engel-Stevens*  
MICHAEL ENGEL-STEVENS, TRUSTEE OF THE ENGEL-STEVENS  
1979 REVOCABLE LIVING TRUST

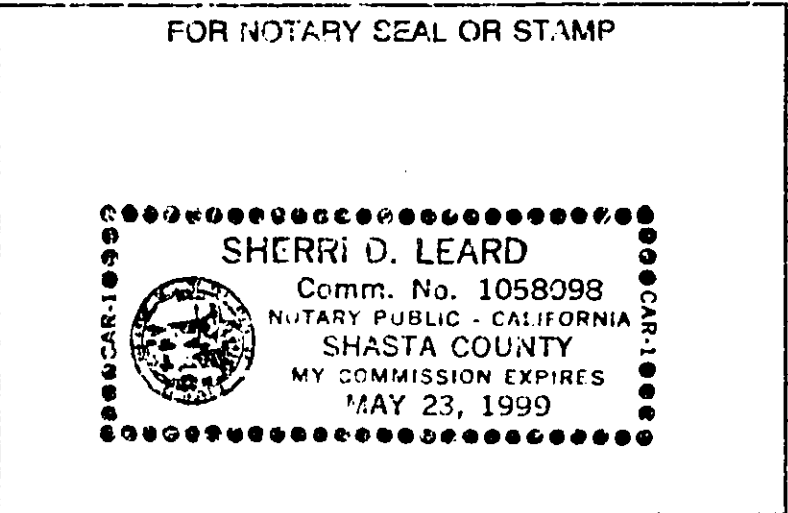
*Hilda Engel-Stevens*  
HILDA ENGEL-STEVENS, TRUSTEE OF THE ENGEL-STEVENS  
1979 REVOCABLE LIVING TRUST

SHASTA COUNTY

STATE OF CALIFORNIA,  
COUNTY OF Shasta } S.S.

On December 4, 1995, before me, Sherri D. Leard  
a Notary Public in and for said County and State, personally  
appeared Michael Engel-Stevens and Hilda Engel-Stevens

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(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 authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

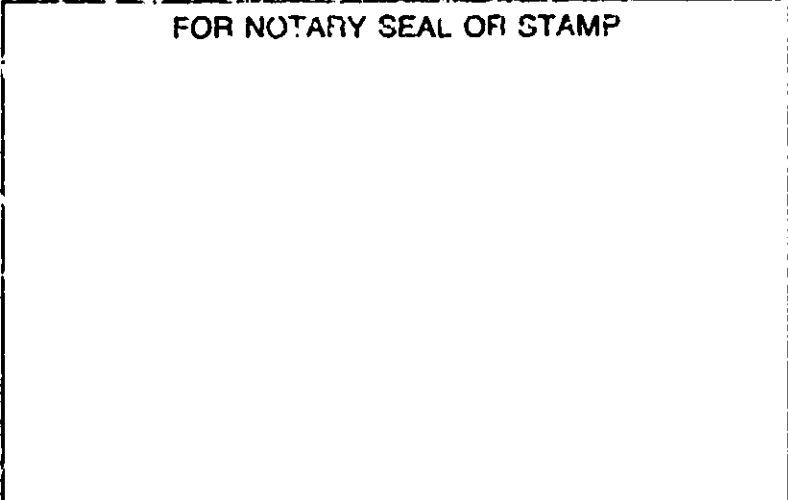


WITNESS my hand and official seal.  
Signature Sherri D. Leard  
Sherri D. Leard

STATE OF CALIFORNIA,  
COUNTY OF \_\_\_\_\_ } S.S.

On \_\_\_\_\_, before me, \_\_\_\_\_  
a Notary Public in and for said County and State, personally  
appeared \_\_\_\_\_

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(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 authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.



WITNESS my hand and official seal.  
Signature \_\_\_\_\_