500 S. Main Street, First Floor, Suite 103 Orange, CA 92868-4512 Or P.O. Box 22000 Santa Ana, CA 92702-2000



CLAUDE PARRISHCOUNTY ASSESSOR

PHONE: (714) 834-2727 FAX: (714) 834-3199 www.ocassessor.gov

ESTABLISHED 1889

OFFICE OF THE ASSESSOR

	SECURITY INTEREST AFFIDAVIT	
Affidavit: I atte	est to the fact that during the period from	to
	, referenced by deed number(s)	
I had no equita	ble or beneficial interest in the real property located at	
	further described as Assessor's Parcel Number	_
for the following	ng reasons:	
In support of th	nis affidavit, the following documents, which are incorporated by reference herein, are	attached.
in support of th	ins arridavit, the following documents, which are incorporated by ferefence herein, are	attaciica.
		
Declaration:	I declare at, California, on,	20,
under penalty of	of perjury, under the laws of the State of California, that the foregoing is true and corr	ect to the
best of my kno	wledge and belief.	
Signature:	Print Name:	
Corporate Title	2:	
Telephone:	Office ()Ext	
	Residence ()	
PETITION N	UMBER (IF APPLICABLE):	

Section 461 of the Revenue and Taxation Code states:

461. FALSE STATEMENT. Every person who willfully states anything which he knows to be false in any oral or written statement, not under oath, required or authorized to be made as the basis of imposing any tax or assessment, is guilty of a misdemeanor and upon conviction thereof may be punished by imprisonment in the county jail for a period not exceeding six months or by a fine not exceeding one thousand dollars (\$1,000), or by both.