

RECORDING REQUESTED BY:

AND WHEN RECORDED MAIL TO:

SPACE ABOVE THIS LINE FOR RECORDER'S USE

**DECLARATION ACCOMPANYING CORPORATE BOND  
And Accompanying Substitution of Title Insurance Company as Trustee  
Civil Code Section 2941.7(f)**

The undersigned declare(s):

1. This declaration pertains to a deed of trust (the "Deed of Trust") recorded on \_\_\_\_\_ as Instrument No. \_\_\_\_\_, Official Records of \_\_\_\_\_ County, California.
2. The undersigned is(are) the trustor and/or current owner of the property described in the Deed of Trust.
3. This declaration and the accompanying corporate bond are recorded pursuant to California Civil Code Section 2941.7 and 2941.7(f), and the bond is for a period of five or more years.
4. The name(s) of the original trustor(s) is(are) \_\_\_\_\_.
5. The name(s) of the original beneficiary(ies) is(are) \_\_\_\_\_.
6. The name(s) and address(es) of the undersigned is(are):

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

7. The obligation secured by the Deed of Trust has been fully satisfied and the present trustee of record and the present beneficiary of record cannot be located after diligent search.
8. The title insurance company being substituted in the accompanying substitution of trustee has accepted the substitution.
9. I/We have mailed by certified mail, return receipt requested, to the last address of the person to whom payments under the Deed of Trust were made and to the last beneficiary of record at the address for such beneficiary shown on the instrument creating, assigning, or conveying the interest, a notice of recording a declaration and bond under this section and informing the recipient of the name and address of the trustee, and of the right to notify the trustee in writing of any objection to the reconveyance of the Deed of Trust.

Said notices were mailed as set forth below:

Date	Name	Address
Date	Name	Address
Date	Name	Address

- 10. The above addresses are all the addresses that I/We have used to correspond with or contact the beneficiary.
- 11. I/We have checked the telephone directory in the city where the beneficiary maintained the beneficiary's last known address or place of business and did not find a listing for the beneficiary.
- 12. In the event the beneficiary or the beneficiary's successor in interest is a corporation, I/we checked the records of the California Secretary of State and the secretary of state in the state of incorporation, if known, and found no additional information about the beneficiary.
- 13. In the event the beneficiary is a state or national bank or a state or federal savings and loan association, I/we made inquiry of the regulatory authority of such bank or savings and loan association, and found no additional information about the beneficiary.

I/We declare under penalty of perjury that the foregoing is true and correct.

Dated: \_\_\_\_\_  
\_\_\_\_\_

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )  
 ) SS.  
COUNTY OF \_\_\_\_\_ )

On \_\_\_\_\_ before me, \_\_\_\_\_, Notary Public, personally appeared \_\_\_\_\_,

who 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.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature \_\_\_\_\_

FOR NOTARY STAMP