RECORDING REQUESTED BY:

WHEN RECORDED MAIL TO:

THIS SPACE FOR RECORDER’S USE ONLY

RESTRICTIVE COVENANT MODIFICATION

**(Unlawfully Restrictive Covenant Modification)**

I(We) have an ownership interest of record in the property located at

 that is covered by the document described below.

The following referenced document contains a restrictive covenant based on 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 violates state and federal fair housing laws and that restriction is void. Pursuant to Section 12956.2 of the Government Code, this document is being recorded solely for the purpose of 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 . A copy of the original document containing the restrictive language is attached hereto with the unlawfully restrictive language stricken.

The modification document shall be indexed in the same manner as the original document pursuant to Government Code Section 12956.2 (e):

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

(Signature)

(Printed Name)

 County Counsel, pursuant to Government Code Section 12956.2, hereby states that it has been determined that the original document

Does Does Not contain an unlawful restriction.

(Signature)

(Printed Name)

 County Counsel

By: Deputy County Counsel

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 COUNTY OF

On before me, , personally appeared

(here insert name and title of the officer)

 , 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.