## Family Member Unit Affidavit

Granto	tor:			
Grante	tee: Public, The			
Legal	Description:			
Asses	ssor's Tax Parcel #:	_		
	ess:			
	it #:			
	affidavit must be notarized and recorded wit vith the Thurston County Community Plannin			
proper	designating an existing manufactured honerty. I understand that the following regulatio orporated Thurston County, and I will abide to	ons apply to the placement of FMUs of		
1. 2.		e primary residence. ar home, not physically connected	to the primary	
3.		es the FMU, it may not be converted to	a rental unit. It	
4.				
5.	to the Thurston County Resource Stewardship Department affirming that it will be occupied by			
6.	a family member.  The person(s) residing in the FMU will be name(s) of the person(s) I plan to have liv		r adoption. The	
	Who is(are) related to me by (circle one) by	olood, marriage, or adoption.		
NC	OTARIZED SIGNATURE:			
Pri	rint Name:			
STATE COUN	E OF WASHINGTON ) NTY OF THURSTON )			
I certify signed purpos	fy that I know or have satisfactory evidence to this instrument and acknowledged it to be ses mentioned in this instrument.	that	r the uses and	
GIVEN	N under my hand and official seal this	day of	, 20	
		NOTARY PUBLIC in and for the State	of Washington,	
	r <sub>i</sub>	ACTURN ST		