

APN:

**RECORDING REQUESTED BY  
AND WHEN RECORDED MAIL TO:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

The undersigned affirms that this document does not contain the personal information of any party.

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**AFFIDAVIT OF BOND POSTING EXEMPTON**

STATE OF NEVADA )  
 ) ss.  
COUNTY OF [COUNTY NAME] )

Before me, the undersigned notary, on this day personally appeared [NAME OF RELATED AFFIANT], known to me to be the person(s) whose name(s) is subscribed below, and being duly sworn, upon oath deposed and stated as follows:

My name is [AFFIANT]. I am of sound mind, capable of making this affidavit and make the statements herein based upon personal knowledge of my familial relationship to the property owner.

I am the Assignee listed in the Affidavit Authorizing Tax Lien Assignment for property with APN # [APN], dated [DATE OF AFFIDAVIT OF AUTHORIZATION]. The name of the Property Owner is [NAME OF PROPERTY OWNER]. I am related to the Property Owner of the subject property within the third degree of consanguinity. I am the [NAME FAMILIAL RELATIONSHIP] of [PROPERTY OWNER]. I am therefore exempt from the requirements of NRS 361.7314 to post a cash or surety bond to indemnify the owner of the subject property from damages resulting from the assignee’s wrongful failure or refusal to perform the obligations of the assignee under the agreement described above.

The contact information for the Assignee is as follows:

Name of Assignee	
Address of Assignee	
Electronic Mailing Address of Assignee	
Daytime Telephone Number of Assignee	

[ASSIGNEE]

\_\_\_\_\_  
BY: [AFFIANT'S TYPED NAME]

TITLE: [AFFIANT'S TITLE]

This instrument was acknowledged before me on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by  
[AFFIANT] of [ASSIGNEE].

\_\_\_\_\_  
NOTARY PUBLIC  
State of Nevada

SEAL OF OFFICE: