

Recording Requested By:

And when recorded return to:

Name ┌
 Street
 Address

 City
 State
 Zip
 └

Space above this line for Recorder's Use

RESTRICTIVE COVENANT MODIFICATION
(RACIAL OR OTHERWISE 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 restriction(s) based on race, color, religion, sex, sexual orientation, familial status, marital status, disability, national origin, source of income as defined in Government Code Section 12955(p), or ancestry that violated state and federal fair housing laws and that restriction is void. Pursuant to Government Code Section 12956.2, this document is being recorded solely for the purpose of eliminating an unlawful restriction(s) 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 Yolo.

The document referenced above was originally indexed in the following manner and this document shall be indexed in like manner pursuant to 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) _____ (Signature)
 Printed Name: Printed Name:

State of _____
 County of _____

Approved as to form:
 Yolo County Counsel

On _____ before me, _____,
(here insert name and title of the officer)

personally appeared _____,
 _____, personally known to me (or 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

 By: _____ Date
 Deputy County Counsel

WITNESS my hand and official seal.

 (Signature of Notary) (Seal)