RECORDING REQUESTED BY:	
WHEN RECORDED MAIL TO:	
NAME	
ADDRESS	
CITY STATE ZIP	
	SPACE ABOVE THIS LINE RESERVED FOR RECORDER'S USI
RESTRICTIVE COVENANT MODIF	ICATION - AFFORDABLE HOUSING CIV 714.6
gender, gender identity, gender express disability, veteran or military status, genetic	ins a restriction based on age, race, color, religion, sex, sion, sexual orientation, familial status, marital status, c information, national origin, source of income as defined e, or ancestry, that violates state and federal fair housing
purpose of redacting and eliminating that re	ment Code, this document is being recorded solely for the estrictive covenant as shown on page(s) of (date) in book and page, or as _ of the official records of the County of Yolo, State of
Attached hereto is a true, correct and corthe unlawfully restrictive covenant redactive	mplete copy of the document referenced above, with
•	ked in the same manner as the original document being
The effective date of the terms and condition effective date of the original document.	ons of this modification document shall be the same as the
Signature:Printed Name:	
of the Government Code, hereby states that it han unlawful restriction that this modification may Or	ursuant to paragraph (1) of subdivision (b) of Section 12956.2 has determined that the original document referenced above y be recorded.  ursuant to paragraph (1) of subdivision (b) of Section 12956.2
of the Government Code, finds that the origina	I document does not contain an unlawful restriction, or the not authorized, and this modification may not be recorded.
Approved:	
By:	Date:
Deputy County Counsel, or Designee	

document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document. } STATE OF CALIFORNIA COUNTY OF } On \_\_\_\_\_\_\_, a Notary Public, personally who proved to me on the basis of satisfactory evidence to be the appeared 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/their/her 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. (Seal) Signature (Signature of Notary)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the