

**EXEMPTION REQUEST**  
**[§11000.1(b)(2)]**

RE 680 (Rev. 6/89)

SUBDIVISIONS

*Information*

- Use this form for Notice of Intention and Request for Exemption for sale or lease of undivided interests.

- *Submit to:* Department of Real Estate  
1651 Exposition Blvd, Sac, CA 95815  
P. O. Box 137005  
Sacramento, CA 95813-7005

1. NAME OF APPLICANT

BUSINESS ADDRESS

TELEPHONE NUMBER

2. LEGAL DESCRIPTION OF PROPERTY TO BE ACQUIRED IN UNDIVIDED INTERESTS BY PERSONS IDENTIFIED IN ITEM #6.

4. THE APPLICANT'S INTEREST IN THE PROPERTY IDENTIFIED IN ITEM #2.

*Note: ATTACH AS AN EXHIBIT TO THIS FORM, A TRUE COPY OF EVIDENCE OF THIS INTEREST, FOR EXAMPLE, TITLE INSURANCE POLICY OR TITLE REPORT, PURCHASE CONTRACT, OPTION AGREEMENT, ETC.*

5. NAME OF ESCROW COMPANY (FOR THIS TRANSACTION)

BUSINESS ADDRESS

CITY

STATE

ZIP CODE

TELEPHONE NUMBER

3. NUMBER OF ACRES TO BE ACQUIRED

6. LIST THE NAME AND UNDIVIDED INTEREST OF ALL PERSONS WHO PROPOSE TO ACQUIRE THIS PROPERTY IN CO-TENANCY. \*

NAME	UNDIVIDED INTEREST **

\* APPEND A COMPLETED AND SIGNED DECLARATION OF PROSPECTIVE UNDIVIDED INTEREST OWNER FOR EACH OF THE PROSPECTIVE OWNERS NAMED.

\*\* TO QUALIFY FOR EXEMPTION PURSUANT TO §11000.1(B)(2) OF THE BUSINESS AND PROFESSIONS CODE, THE TOTAL OF THE FIGURES IN THE "UNDIVIDED INTEREST" COLUMN MUST EQUAL 1 (IF INTERESTS ARE EXPRESSED IN FRACTIONS) OR 100 (IF EXPRESSED AS PERCENTAGES).

7. TITLE TO THE PROPERTY WILL BE HELD BY THE AFORESAID OWNERS AS TENANTS IN COMMON. NO ORGANIZATION OF OWNERS HAS BEEN FORMED NOR IS ONE CONTEMPLATED AS A PART OF THIS OFFERING. ....

\_\_\_\_\_ Applicant's Initials

8. I HAVE NOT BEEN, AND HAVE NO PRESENT INTENTION OF BECOMING, A PARTY TO AN OFFERING OF UNDIVIDED INTERESTS IN REAL PROPERTY CONTIGUOUS TO THE PROPERTY THAT IS THE SUBJECT OF THIS REQUEST FOR EXEMPTION. ....

\_\_\_\_\_ Applicant's Initials

**CERTIFICATION**

I HEREBY CERTIFY UNDER PENALTY OF PERJURY THAT THE STATEMENTS CONTAINED IN THIS FORM, TOGETHER WITH DOCUMENTS SUBMITTED HEREWITH, ARE TRUE, CORRECT AND COMPLETE ANSWERS OR REPRESENTATIONS TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NOTE: VERIFICATION MADE OUTSIDE OF THE STATE OF CALIFORNIA MUST BE CERTIFIED BY A NOTARY PUBLIC.

SIGNATURE	DATE
	

PRINTED NAME OF SIGNER	TITLE

BUSINESS ADDRESS (STREET ADDRESS, CITY, STATE, ZIP CODE)

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