Trustee's Consent to Lot Line Adjustment

This is to certify that the undersigned Trustee accepts and guarantees that the adjustment of existing trust deed boundaries description(s) will match the description(s) of the parcel boundaries as shown on the County of Sacramento lot line adjustment PLNP201__-00____. (Name of Trustee)______, is the Trustee under the Deed of Trust dated______ and recorded in Book ______ at Page in the Office of the County Recorder of Sacramento County, State of California. Said Deed of Trust encumbers the real property described in Lot Line Adjustment PLNP201__-___. Pursuant to the request of the Beneficiary of the Trust Deed, Trustee does hereby consent to the execution and recordation of the Lot Line Adjustment, and agrees that upon recordation of the Lot Line Adjustment, the Trustee's and Beneficiary's interests in said real property shall apply to the entire adjusted parcel(s) rather than to merely a portion of the adjusted parcel. Trustee or Trustee's representative authorized to approve: (Name and title of Trustee's representative) Signature of Trustee or Trustee's Representative: Dated: (Area Code and Phone Number) (E-mail address)

(Assessor's Parcel Numbers)