Recording requested by:	
When recorded return to:	
(space above this line reserved for recorder) RESTRICTIVE COVENANT MODIFICATION	
I(We)	have an ownership interest of record in the
by the document described below.	that is covered
The following referenced document contains a restriction based on race, color, religion, sex, gender, gender identity, gender expression, sexual orientation, familial status, marital status, disability, veteran or military status, genetic information, national origin, source of income as defined in subdivision (p) of Section 12955, or ancestry that violated state and federal fair housing laws and that restriction is void. Pursuant to Section 12956.2 of the Government Code, this document is being recorded solely for the purpose of eliminating that restrictive covenant as shown on page(s)	
of the document records	ed onin Bookand of the Official Records of
of the document recorded onin Bookand Page, or Instrument Numberof the Official Records of the County of A copy of the original document containing the restrictive language is attached hereto with the unlawfully restrictive language stricken.	
attached hereto with the unlawfully restrictive language stricken.	
This modification document shall be indexed in the same manner as the original document pursuant to Government Code 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:
A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.	
State of California County of	
Onbefore me,	
personally appeared	
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.	
Signature(Seal)	
Approved as to form: Placer County Counsel By: Date: Deputy County Counsel	