

NOTICE

If this document contains any restriction based on age, 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 restriction violates state and federal fair housing laws and is void, and may be removed pursuant to Section 12956.2 of the Government Code by submitting a "Restrictive Covenant Modification" form, together with a copy of the attached document with the unlawful provision redacted to the county recorder's office. The "Restrictive Covenant Modification" form can be obtained from the county recorder's office and may be available on its internet website. The form may also be available from the party that provided you with this document. Lawful restrictions under state and federal law on the age of occupants in senior housing or housing for older persons shall not be construed as restrictions based on familial status.

Recording Requested By:

When Recorded Mail To:

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 based on race, color, religion, sex, familial status, marital status, disability, 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 a restriction as shown of page(s) _____ of the document recorded on _____ (date) in book _____ of the Official Records of the County of _____.

A certified copy containing the restrictive language is attached hereto and incorporated by reference.

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.

Print Name: _____ (Signature)

Print Name: _____ (Signature)

(Attach Acknowledgment)

County Counsel, pursuant to Government Code Section 12956.2, hereby states that it has determined that the original document
 Does Does not
contain an unlawful restriction.

San Mateo County, County Counsel

By: _____
Deputy County Counsel