

Tax Serial no. 05-051-0216
BLT: 14,945

Entry 2023003475
Book 1827 Pages 147-149 \$40.00
10-Jul-23 12:44
BRENDA MCDONALD
RECORDER, UINTAH COUNTY, UTAH
BASIN LAND TITLE - VERNAL
335 WEST 50 NORTH #E-7
VERNAL, UT 84078
Rec By: Chery Bolton, Deputy Recorder
Electronic Recording

AFFIDAVIT OF SURVIVING/SUCCESSOR TRUSTEE

Ent 2023003475
Book 1827 Pg 147

DAVID B. GRANT, being first duly sworn deposes and states that the Successor Trustees are **ZACHARY D. GRANT, DAVID B. GRANT AND TREVOR KYLE** of that certain Trust Agreement known as **THE DALE E. GRANT TRUST, dated June 7, 2007** and as the Successor Trustees of said trust agreement as per Article XXII section C is empowered to deal with any and all property of the trust including, but not limited to, the following described parcel of real property located in Uintah County, State of Utah, to-wit:

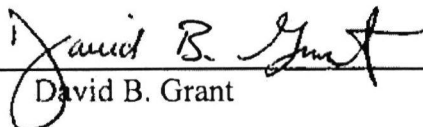
UNIT 26, as shown in the plat for SPLIT MOUNTAIN VILLAGE AMENDED, A PLANNED RESIDENTIAL UNIT DEVELOPMENT, FINAL PLAT, PHASE 1, recorded in the County Recorder of Uintah County, Utah, as Entry No. 2006009971 in Book 997 at Page 396.

TOGETHER with an interest in the common area pursuant to Conditions, Covenants and Regulations, recorded July 13, 2006 as Entry No. 2006006655 in Book 983 at page 708, records of Uintah County, Utah, and as subsequently amended, modified and/or supplemented.

The death of the Trust maker and original trustee **DALE E. GRANT** (aka Dale Eldredge Grant Jr.) of the trust is evidenced by his death certificate which is attached hereto.

I certify that the above is true.

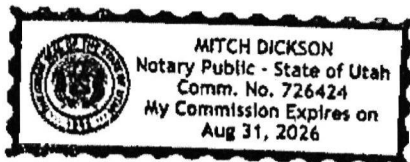
Dated this ^{3rd} day of July, 2023.




David B. Grant

STATE OF **UTAH**
COUNTY OF **UTAH**

On this ^{3rd} day of July, 2023, personally appeared before me, David B. Grant, the signer of the within instrument, who duly acknowledged to me that he executed the same.





Notary Public

STATE OF UTAH
CERTIFICATION OF VITAL RECORD

CERTIFICATE OF DEATH

State File Number: 2021014915

Dale Eldredge Grant Jr

DECEDENT INFORMATION

Dale of Death:	September 2, 2021	Time of Death:	16:30
City of Death:	Washington Terrace	County of Death:	Weber
Age:	81	Date of Birth:	September 9, 1939
Place of Birth:	San Francisco, California	Sex:	Male
Armed Services:	No	Marital Status:	Divorced
Spouse's Name:		Usual Occupation:	Owner
Industry/Business:	Men's Clothing Store	Education:	Some College but No Degree
Residence:	Huntsville, Utah	Father's Name:	Dale Eldredge Grant Sr
Mother's Name:	Patricia Fern Collard	Facility Type:	Hospital Inpatient
Facility or Address:	Ogden Regional Medical Center		

INFORMANT INFORMATION

Name:	David Brian Grant	Relationship:	Son
Mailing Address:	1053 North 1540 East, Lehi, Utah 84043		

DISPOSITION INFORMATION

Method of Disposition:	Burial
Place of Disposition:	Huntsville Cemetery, Huntsville, Utah
Date of Disposition:	September 10, 2021

FUNERAL HOME INFORMATION

Funeral Home:	Premier Funeral Services
Address:	67 East 8000 South, , Midvale, Utah 84047
Funeral Director:	Jared O M Fairbanks

MEDICAL CERTIFICATION

Certifying Physician:	Paul G Cheriyan MD, 5505 South 900 East Suite #240, Murray, Utah 84117
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CAUSE OF DEATH

COVID 19
Tobacco Use: Non-user
Medical Examiner Contacted: Yes Autopsy Performed: No Manner of Death: Natural

Date Registered: September 14, 2021
Date Issued: September 15, 2021

This is an exact reproduction of the facts registered in the Utah State Office of Vital Records and Statistics. Security features of this official document include: Intaglio Border, V & R images in top cycloids, and Intaglio microtext. This document displays the date, seal and signature of the Utah State Registrar of Vital Record and Statistics.



Linda S. Wininger
Linda S. Wininger, MSW, LCSW
State Registrar
Reg. #721



Angela C. Dunn
Angela C. Dunn, MD, MPH
Director/Health Officer
County/District Health Department



ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

STATE OF UTAH - DEPARTMENT OF HEALTH - OFFICE OF VITAL RECORDS AND STATISTICS

AFFIDAVIT TO AMEND A RECORD

Corrections to a vital record may be made by affidavit but an item on a birth record may be corrected by affidavit only once. A court order is required for gender or subsequent changes. This form is not used with a court order. A court order is necessary to make any corrections to a Delayed Birth Certificate or Death Certificate. This affidavit cannot be used to correct medical information. Many changes, including marital status, require more information; please visit our website or contact our office. Please return any copies of the certificate with this completed affidavit and all supporting documentation. If corrected certificates are reissued within 90 days of issuance, the new certificate fee will be waived but affidavit fees may still apply. This affidavit may be mailed with the correct fees, proof of ID and application for a new certificate.

Mailing Address: Office of Vital Records and Statistics PO Box 141012 Salt Lake City, UT 84114-1012
Physical Address: Office of Vital Records and Statistics 288 North 1460 West Salt Lake City, UT 84116
Contact Info: <https://VitalRecords.utah.gov> 801-538-6105 vrequest@utah.gov



Affidavit Instructions: Please print or type. Items 1-6: Enter the facts as reported on the current vital record. Item 7: Enter the item number from items 1-6 that will be changed, if applicable. Item 8a: Enter the information as stated on the original record. Item 8b: Enter the correct information as it should be stated. Item 9: Enter the reason the change is necessary. Item 10: Enter the proofs used to support the change. The proofs must match the asserted fact(s) exactly. Proofs must be submitted with the affidavit. Items 11-22: Enter witness information.

Witnesses for Birth Certificate: If the person listed on the record is under 18 years of age, both parents of record **MUST** sign the affidavit. If only one parent is listed, the second witness **MUST** be an immediate family member of the listed parent. If the person listed on the record is 18 years of age or older, he/she **MUST** sign as one of the witnesses. The second witness **MUST** be their immediate family member.

Witnesses for Death Certificate: The informant must sign as a witness along with an immediate member of the decedent's family. If adding a spouse, the spouse must sign as a witness. If no immediate family, a person who is knowledgeable of the facts may sign.

[] BIRTH [] DEATH [] STILLBIRTH STATE FILE NUMBER: _____

INFORMATION AS REPORTED ON RECORD	1a FIRST NAME		1b MIDDLE NAME		1c LAST NAME	
	2 SEX	3 DATE OF EVENT		4. PLACE OF OCCURRENCE (City and County)		
	5 NAME OF PARENT 1 (Maiden name if applicable)			6. NAME OF PARENT 2 (Maiden name if applicable)		
STATEMENT OF AMENDMENTS	7 ITEM NO.	8a FACTS EXACTLY AS ON ORIGINAL RECORD			8b. CORRECT INFORMATION	
WHY IS CHANGE NEEDED?	9.					
DOCUMENTS USED	10.					
OATH OF FIRST WITNESS (MUST BE 18 OR OLDER)	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.					Subscribed to and Sworn to Before me this ____ day of ____ 20__
	11a SIGNATURE OF WITNESS (Must sign in front of Notary)			11b PRINTED NAME OF WITNESS		STATE _____ COUNTY _____
	12 DATE SIGNED	13 AGE OF WITNESS	14 DAYTIME TELEPHONE		15 RELATIONSHIP TO 1a	
	16 ADDRESS OF WITNESS					
	NOTARY SIGNATURE _____					
OATH OF SECOND WITNESS (MUST BE 18 OR OLDER)	I hereby certify under penalty of perjury, that I have personal knowledge of the above facts and that the information given is true and correct.					Subscribed to and Sworn to before me this ____ day of ____ 20__
	17a SIGNATURE OF WITNESS (Must sign in front of Notary)			17b PRINTED NAME OF WITNESS		STATE _____ COUNTY _____
	18 DATE SIGNED	19 AGE OF WITNESS	20 DAYTIME TELEPHONE		21 RELATIONSHIP TO 1a	
	22 ADDRESS OF WITNESS					
	NOTARY SIGNATURE _____					

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