

Title
RESTRICTIVE COVENANT MODIFICATION

Purpose
To allow the recordation of a document to strike out blantant racial, religious, or other restrictive covenants from a previously recorded document after local County Counsel determines such language violates the fair housing laws and is void

Requirements
1. Name(s) of owner
2. Identification of document page number and language in violation
3. Recording reference of document with unlawful restrictive covenant
4. Attached copy of referenced document (must be complete document striking out the unlawful restrictive language)
5. Signature(s) of owner(s)
6. Signature(s) acknowledged
7. Approval by County Counsel

Fees
Regular
Fees may be waived at the discretion of the Recorder

Legal References
GOV 12956.2, 12956.2(c) (indexing), 27287 (ack), 27361.6 (rec.ref.)

Comments
The county recorder shall make the Restrictive Covenant modification form available to the public per GOV 12956.2(e)

Index
Modification shall be indexed in the same manner as the original document being modified

RECORDING REQUESTED BY
AND WHEN RECORDED MAIL TO
NAME
ADDRESS
CITY, STATE/ZIP
Rev. 2020
space above this line for Recorder's use only

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, gender, gender identity, gender expression, sexual orientation, marital status, national origin, ancestry, familial status, source of income, disability, veteran or military status, or genetic information as defined in subdivision (p) of Section 12955, or ancestry that violates 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 recorded on _____ (date) in Book _____ and Page _____, or Instrument Number _____ of the Official Records of the County of _____.

This modification document shall be indexed in the same manner as the original document pursuant to Government Code Section 12956.2(c):
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 Printed Name

SAMPLE

APPROPRIATE ACKNOWLEDGMENT SHOULD APPEAR HERE

Approved:

By: _____ Date: _____
Deputy County Counsel