## Supplemental Instructions [§11018.5(a)]

RE 621A (Rev. 1/97)				SUBDIVISIONS
These instructions supplement original escrow instru	uctions heretofore	furnished to		
		(herea	fter Esc	row Depository)
on RE 621 for the subdivision (hereafter The Subdivision				
	Cou	nty of		
Department of Real Estate File No.				
Subdivider has transmitted herewith to Escrow Depo		☐ Surety Bond	□ Са	ash Deposit
☐ Letter of Credit ☐ Other:				
along with an applicable agreement and escrow instructions				
of said security or evidence of said cash deposit is attache				
to □ Section 11018.5 (a)(2)(A) □ Section 11018.5 (	a)(2)(E) of the B	usiness and Professi	ons Cod	e for the purpose
of assuring the lien-free completion of the subdivision im	provements in The	Subdivision for whi	ich assuı	cance of lien-free
completion is not otherwise provided as of the date of furn	ishing of this secur	ity.		
Any security instrument shall remain in the custody o	r subject to the con	trol of Escrow Depos	sitory ur	ntil the expiration
of all applicable lien periods after receipt of notification by	escrow from the _			
homeov				
any cluster building(s) designated in the Planned Construc				
SIGNATURE OF SUBDIVIDER			DATE	
<b>A</b>				
PRINTED NAME OF SUBDIVIDER	TITLE		•	
ADDRESS	CITY		STATE	ZIP CODE

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## **DEPARTMENT OF REAL ESTATE**

Based upon evidence submitted by subdivider, these supplemental escrow instructions and the form and amount of the security instrument referred to above are acceptable by the Department of Real Estate of the State of California as a reasonable arrangement within the meaning of Section 11018.5(a) to assure completion of The Subdivision and all improvements for which the financial security is provided.

SIGNATURE OF SPECIAL INVESTIGATOR	DATE	
Z.		
PRINTED NAME OF SPECIAL INVESTIGATOR	TITLE	-
ADDRESS	CITY	STATE
Escrow Depository acknowledges that it above supplemental instructions and agrees to		edges receipt of an executed copy of the
SIGNATURE OF ESCROW HOLDER	DATE	
Z.		
PRINTED NAME OF ESCROW HOLDER	TITLE	,
ADDRESS	CITY	STATE