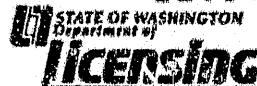


117536

BOOK 138 PAGE 462



MANUFACTURED HOME APPLICATION

RECORDED RECORD
SKAMANIA CO. WASH
BY Michelle Severy

TITLE OPTIONS
 Original
 Transfer
 Duplicate
 Release



TITLE ELIMINATION (Complete all but section 3, below)

TRANSFER IN LOCATION (Complete ALL sections below)

REMOVAL FROM REAL PROPERTY (Complete all but section 4, below)

RECORDED AT
REQUEST OF:

SEP 30 2 34 PM '93

P. Severy
AUDITORY

GARY M. OLSON

COLOR #S
NOT ON CH
W/OUT COLOR

Gray

YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER/CHN	COA/ST#	TOP OR FRONT	COLOR #S
88	Brookley	28/48	Serial # BD 7058	BL 2		

LAND

- Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.
- Land to which the manufactured home is being: AFFIXED REMOVED

TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership are true and correct.

NAME	TITLE COMPANY/HOME INSURER	SIGNATURE
<i>Michelle LaRae Severy</i>		X

NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative.

BUILDING PERMIT OFFICE CERTIFICATION

I certify that the manufactured home has been affixed to the real property as described, or the following building permit has been issued for this purpose and will be inspected upon completion.

NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE NUMBER	DATE
<i>Dean A. Nygaard</i>	X <i>Dean A. Nygaard</i>	<i>Building</i> 509-477-7480	9-30-93

OWNER INFORMATION

5) COUNTY #	INC	UNINC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner:	FILING FEE
<i>Skamania Co.</i>						APPLICATION
						MOBILE HOME FEES
						ELIMINATION
						USE TAX
						SUB-AGENT FEES
						TOTAL FEES & TAX
					\$	

NAME OF FIRST REGISTERED OWNER
Michelle LaRae Severy

NAME OF SECOND REGISTERED OWNER
J.P.R.

ADDRESS OF FIRST REGISTERED OWNER
Brooks Rd Po Box 179

CITY *Curran* STATE *WA* ZIPCODE *98610*

NAME OF FIRST LEGAL OWNER
Key Bank of Washington

MAILING ADDRESS OF FIRST LEGAL OWNER
P.O. Box 350

CITY *White Salmon* STATE *WA* ZIPCODE *98672*

*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR DATE *4/24/93*

ELIMINATION OF TITLE: *Caroline* *None*

Any person who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine of up to \$6,000 and/or 10 years imprisonment. I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.
(Title)

X Michelle Severy

X

X

NOTARY OR LICENSE AGENT & HUMAN
Kellie *Severy* *30 DM 10 93*

SUBSCRIBED AND SWEAR TO BEFORE ME THIS

READING IN USE TAX EXEMPT *Sale to Indian on the Reservation (attach notarized statement of delivery)*

WA DM NO. *Golden West* DEALER'S AUTHORIZED SIGNATURE

X

RECORDING OFFICE *Skamania County*

This form has been recorded in the county records.

RECORDING NUMBER *117536*

COUNTY *Skamania*

VOLUME/PAGE *138/462*

DATE *9/30/93*

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3-8-17-3-1300

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the following described real estate, situated in the County of Skamania
State of Washington, together with all after acquired title of the grantor(s) therein:

That portion of the North half of the South West Quarter
of the South west Quarter ($N\frac{1}{2}$ SW $\frac{1}{4}$, SW $\frac{1}{4}$) of Section 17,
Township 3 North, Range 8 E. W.M., described as follows:

Beginnering at the South east corner of the $N\frac{1}{2}$ of the SW $\frac{1}{4}$
of the SW $\frac{1}{4}$ of the ^{said} Section 17; Thence north along the
east line of the SW $\frac{1}{4}$ of the SE $\frac{1}{4}$ of the said Section 17
a distance of 290 feet; Thence west 150 feet; Thence south
290 feet to the south line of the $N\frac{1}{2}$ of the SE $\frac{1}{4}$ of the
SW $\frac{1}{4}$ of the said Section 17; Thence east 150 feet to point
of beginning.

Registered	P
Indexed, Dir	P
Indirect	P
Filmed	
Mailed	