



MANUFACTURED HOME APPLICATION

FILED FOR RECORD
SKAMANIA CO. WASH
RECORDED'S CLOCK
BY SKAMANIA CO. TITLE

MAR 24 1994

J. Lowry
AUDITOR

RECORDING
REGISTRY
RYM. OLSON

TITLE OPTIONS

☐ Original
☐ Transfer
☐ Duplicate
☐ Release

☒ X

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)

1				218834		MANUFACTURED HOME		BOOK 14		PAGE 682	
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)			COLOR #1 TOP OR FRONT:	COLOR #2 BOTTOM OR REAR COLOR:				
1984	BEPKS	46/28	ORFL2AE334803565								

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:		<input type="checkbox"/> AFFIXED	<input type="checkbox"/> REMOVED
		PROPERTY TAX PARCEL NUMBER 01-05-04-0-0-0402	

3				TITLE COMPANY CERTIFICATION			
I certify that the legal description of the land and ownership are true and correct.							
NAME		TITLE COMPANY/PHONE NUMBER		SIGNATURE		DATE	
April Sykes		Skamania County Title		<i>[Signature]</i>		2/28/94	
NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative.							

4				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.				BUILDING PERMIT # 1271			
NAME		SIGNATURE/TITLE		BUILDING PERMIT OFFICE/PHONE NUMBER		DATE	
Dean A. Nygaard		<i>[Signature]</i>		Ska Co.		1-7-94	

5				OWNER INFORMATION				FEES			
COUNTY #	INC	USING	NUMBER OF REGISTERED OWNERS	2	NUMBER OF LEGAL OWNERS	1	Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner:				
NAME OF FIRST REGISTERED OWNER						HICKIES L412951F		APPLICATION			
NAME OF SECOND REGISTERED OWNER						HICKIES R41101DE		MOBILE HOME FLEES			
Kelli R. Hickey						This "NUMBER" may be found on your Washington Drivers License/I.D. Card - If the owner is a business, provide the Unified business identifier (UBI) number.		ELIMINATION			
ADDRESS OF FIRST REGISTERED OWNER								USE TAX			
MP 11.66 HWY 140								SUB-AGENT FEES			
CITY						STATE		ZIP CODE			
Washougal						WA		98671			
NAME OF FIRST LEGAL OWNER						More than two registered - one legal owner? . . .		TOTAL FEES & TAX			
Lacamas Community Credit Union						Please use attachment forms (TD-420-732)					
MAILING ADDRESS OF FIRST LEGAL OWNER											
236 NE 4th Avenue											
CITY						STATE		ZIP CODE			
Camas						WA		98607			
* SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: X William R. Thompson						DATE					
						1/19/94					

Anyone 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 \$5,000 and/or 10 years imprisonment (RCW 4B.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.				DEALER'S REPORT OF SALE				PURCHASE PRICE			
Registered Owner (Signature(s))				I certify that this information is correct. The vehicle is clear of encumbrances except as shown.				\$			
<i>[Signature]</i>				DEALER NAME				TAX JURISDICTION/TAX RATE			
<i>[Signature]</i>				WA DLR NO.				K-9-10166			
<i>[Signature]</i>				DEALER'S AUTHORIZED SIGNATURE				DATE OF SALE			
<i>[Signature]</i>				<i>[Signature]</i>				Indirect			
<i>[Signature]</i>				<i>[Signature]</i>				Fitted			
<i>[Signature]</i>				<i>[Signature]</i>				Manned			

Subscribed and Sworn to Before Me This		Residing in		USE TAX EXEMPT	
14 Day of		Stevenson		Sale to Indian on the	
Jan 1994		Skamania County		Reservation (attach notarized statement of delivery)	

6				COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)			
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.							
NAME		SIGNATURE		OFFICER'S OPERATOR NUMBER		DATE	
Moser		<i>[Signature]</i>		30-01-08		3-2-94	

7				RECORDING OFFICE			
This form has been recorded in the county records.							
RECORDING NUMBER		COUNTY		VOLUME/PAGE		DATE	
118834		Skamania		141/682		3/2/94	

EXHIBIT "A"

The East 330 feet of the North 650 feet of the Northwest Quarter of the Northwest Quarter of Section 9, Township 1 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington, lying Southerly of State Road 120, formerly secondary State Highway No. 8-B, as conveyed to the State by instrument recorded in Book 27, Page 48.

Skamania County Building Department
CALL FOR INSPECTION

Name Steven L. HickayDate 1-7-94 Time 10:30Permit No. 1271 (1984)Type of Occupancy R-3 Mobile HomeType of Inspection Title Examination

Location in detail, address, landmarks, etc. _____

M.P. 11.66R SR 140 Washington

- ① place (5) post (ceiling Dist)
to support porch Roof
② Rear Deck if replaced to
be 50' from high water mark

Date of Inspection _____