STATE OF WASHINGTON Department of **Licensing**

MANUFACTURED HOME APPLICATION 121172

RECORDER'S CLOCK

BOOK 178 PAGE 818

FILED AT THE REQUEST OF: NAME ADDRESS

Please check one

- [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 MANUFACTURED HOME

DECAL/LABEL NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
238409	75	EATNP	24x60	6520

2 LAND

Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office or it may be typed or printed on an Additional Attachment Form (TD-420-732). Manufactured home will be [X] AFFIXED [ ] REMOVED

PROPERTY TAX PARCEL NUMBER: 02 06 34 0001 13 70

3 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
Rodney Gish	Clark County Title	X Rodney Gish	3/13/95

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

4 BUILDING PERMIT OFFICE CERTIFICATION

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

BLDG PERMIT #

NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE PHONE #	DATE
Ken Baird	X Ken Baird Sales Counter Clerk	509-427-9484	3/7/95

5 OWNER INFORMATION

COUNTY #	INC	UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:
7	[ ]	[ ]			

NAME OF FIRST OWNER: MICHAEL A GIMMEY

NAME OF SECOND OWNER: KATHRINA MAE GIMMEY

ADDRESS OF OWNER: 4KL Woodland Creek

CITY: Skamania STATE: WA ZIP CODE: 98648

NAME OF FIRST LEGAL OWNER: Commercial Credit Corp

MAILING ADDRESS OF FIRST LEGAL OWNER: 5166 Glenridge Dr, Suite 41

CITY: Vancouver STATE: WA ZIP CODE: 98661

*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY: X [signature]

--OR-- If the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.

More than two owners or one lienholder? Please use attachment form(s) #TL-420-732.

FEES PAID FOR RECORD SKAMANIA CO. WASH BY SKAMANIA COUNTY TITLE MAR 21 9:44AM '95 PAID

ELIMINATION AUDITOR SHARON M. OLSON

SUB-AGENT FEES

TOTAL FEES & TAX $

DEALER'S REPORT OF SALE

I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

WA DLR NO.	DATE OF SALE	PURCHASE PRICE
		$ Indexed, Dig ✓

DEALER NAME: TAX JURISDICTION/TAX RATE Indexed Filmed Mailed

DEALER'S AUTHORIZED SIGNATURE: X

[ ] USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)

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 46.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE: Owner Signature(s) & Title(s):

X [signature]

X Kathrina Mae Gimmey

X

NOTARY OR LICENSE AGENT: X [signature] SUBSCRIBED TO AND SWORN BEFORE ME THIS 17th DAY OF March 19 95 Residing in (County) Clark

6 COUNTY AUDITOR OR DESIGNEE OFFICE APPROVAL: (Not for use by Sub-Agents)

I certify that the application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the application process.

NAME	SIGNATURE	OFFICE/VI & OPERATOR NUMBER	DATE
VIOLET BARTELS	X [signature]	30-01-05	3-21-95

TD-420-725 MANUFACTURED HOME APPL (R/2/94)M Page 1 of 2

EXHIBIT "A"

LOT 6, SPRING LANE ESTATES, ACCORDING TO THE PLAT THEREOF, RECORDED IN BOOK "B" OF PLATS, PAGE 58, RECORDS OF SKAMANIA COUNTY, WASHINGTON.

TOGETHER WITH A 60 FOOT PRIVATE ROAD AND UTILITY EASEMENT AS SHOWN ON THE FACE OF THE RECORDED PLAT.