

**MANUFACTURED HOME
APPLICATION**

122898

RECORDER'S CLOCK

FILED AT THE REQUEST OF:
NAME

BOOK 151

PAGE 386

ADDRESS

Please check one

- ☒ TITLE ELIMINATION (Complete all but section 3, below)
☐ TRANSFER IN LOCATION (Complete ALL sections below)
☐ REMOVAL FROM REAL PROPERTY (Complete all but section A, below)

1. MANUFACTURED HOME

TPC/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	1975	Kingswood	64/24	K6424PK334S4735

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 ☒ AFFIXED ☐ REMOVED

PROPERTY TAX PARCEL NUMBER
 02-06-23-2-0-0114-00
 02-06-23-2-0-0113-00

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
		X	

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.

NAME	SIGNATURE/TITLE	BUILDING PERMIT OFFICE/PHONE #	DATE
Ken Baird	X Ken Baird Building Inspector	(509) 427-9484	6/22/95

5. OWNER INFORMATION

COUNTY #	INC	UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License card number (PIC) for each owner:
	<input type="checkbox"/>	<input type="checkbox"/>	1	1	

NAME OF FIRST OWNER
 Linda Ann Anderson

NAME OF SECOND OWNER

ADDRESS OF OWNER

P O Box 1006

CITY

Stevenson

STATE

WA

ZIP CODE

98648

NAME OF FIRST LEGAL OWNER*

First Independent Bank

MAILING ADDRESS OF FIRST LEGAL OWNER

P O Box 340

CITY

Stevenson

STATE

WA

ZIP CODE

98648

*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY.

X *[Signature]*

FILED FOR RECORD
 SKAMIA CO. WASH
 BY SKAMIA CO. CLERK

JUL 27 11 41 AM '95

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

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

DEALER NAME

TAX JURISDICTION/TAX RATE

DEALER'S AUTHORIZED SIGNATURE

X

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

NOTARY OR LICENSE AGENT & SIGNATURE

SUBSCRIBED TO AND SWORN BEFORE ME THIS 15th DAY OF MAY 1995

Residing in (County)

OFFICE/OPS OPERATOR NUMBER

DATE

7/27/95

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	OFFICE/OPS OPERATOR NUMBER	DATE
Ana Moser	X Ana Moser	30-01-08	7/27/95

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Tract No. 13 COLUMBIA RIVER ESTATES, as more particularly shown on a survey thereof, recorded at Page 364 of Book J of Miscellaneous Records, under Auditors File No. 75655, records of Skamania County, Washington, said real property being a portion of the Northwest Quarter of the Northwest Quarter of Section 23, Township 2 North, Range 6 East of the Willamette Meridian.

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NOTE: Investigation should be made to determine if there are any service, installation, maintenance or construction charges for sewer, water, telephone, gas, electricity or garbage and refuse collections, or any covenants, conditions and restrictions under which estate, lien or interest in property has been, or may be, cut off, subordinated or otherwise implicated.

CONTINUED

Unofficial
Copy