| | 1250 | | BOOK | 156 PAGE | | | |
|---|--|---|---|---|---|--|--|
| STATE OF WASHINGT | MICH TO | FACTURED HO | C BUSGENERIC OCK O A | RD FILEDA' | FTHE REQUEST OF: | | |
| ase Check one | | | | ANNOES | | | |
| TRANSFER IN LO | ON (Complete all but se CATION (Complete AL REAL PROPERTY (Co | ction 3, below) _ sections below) mr¹ete all but section 4, belo | APR 12 12 27 PM OKaury AUDITOR | '96 | | | |
| MANUFACTURED | | | GARY M. OLSO | N CLE IDENTIFICATION NUMBER | | | |
| 278813 1961 LAMPL WIDTHLENGTH 64×12 | | | 12 VEH | VEHICLE IDENTIFICATION NUMBER (VIN) | | | |
| tach a copy of the i | legal description of | your land. It can be of | otained from your County | PROPERTY TAX PA | DOE! MUMBED | | |
| ssessor's office or it anufactured home | t may be typed or p | rintegron an Additional | Attachment Form (TD-420) REMOVED | -732). <i>O2-06-3</i> | 4-1-0-0100 | | |
| TITLE COMPANY | | | | | | | |
| | | | rue and correct per the real | | | | |
| ME. | | PANY/PHONE NUMBER | SIGNATURE X | DAYE | | | |
| | cation with a Licer TOFFICE CERTIFICA | | alendar days of the date Titl | e Company Represe | ntative signs. | | |
| | | | al property as described, or Il be inspected upon comple | | RMT# | | |
| # | SIGNATURE | | BL7G PERMIT OF | FICE/PHONE # DATE | 1 -1/ | | |
| en BAIR | | n Barn B | Roly Inspector (509) 4 | 27-9484 71 | 24/95 | | |
| OWNER INFORM | | | | | FEES | | |
| DUNTY# INC UNINC | * REGISTERED OWNERS | | ovide the Washington Driver's L and number (PIC) for each owner | | ie | | |
| NAME OF FIRST OWNER | <u> </u> | | | APPLICA* | TION | | |
| 100 | Worfield | | 6 P N | \ \tag{2.50} | ,,,,, | | |
| William J. N NAME OF SECOND OWNER | | | | MOBILE | IOM & FEES | | |
| Karen L. Wa: | rfield | | | ELIMINAT | <u> </u> | | |
| P.O. Box 2 | | · | OR if the owner | s a business, | <u> </u> | | |
| CITY | ************************************* | STATE ZIP CODE | provide the Unified E | | | | |
| Stevenson | | WA 98648 | business Registratio | n & Licenses | | | |
| NAME OF FIRST LEGAL | | | Docum/int, | SUB-AGE | NT FEES | | |
| Riverview Sa MAILING ADDRESS OF F | avings Bank | | | | | | |
| P.O. Box 10 | | | More than two owners lienholder? Please us | | . FEES & TAX | | |
| CITY | | STATE ZIP CODE | form(s) #TD-420-732 | | | | |
| Camas | | WA 98607 | DEALER'S REPOR | OF SALE | | | |
| | | TFOR MINER VEGETE EN | | ormation is correct. Th | e vehicle is clear | | |
| FROM REAL PROPERTY | and the same of th | George AUP | of encumbrances e | | S-t-statee | | |
| one who knowingly makes a conviction may be purish | a false si gnatific at a mate ned to a fine of up to 1000 | rial fact is juilty of a felony, and | WA DLR NO. DATE | of sale Purchas | ndexed, Uir | | |
| W 46.12.210). Í DO SOL | | rial fact (squilty of a felony, and on don't not pears imprisonment ENALTY OF PERJURY LAW HIGLE AND THIS INFORMA- | DEALER NAME | | DICTION TAK HATE | | |
| N IS ACCURATE: ONE | Purporale & Title (| HICLE AND THIS INFORMA- | | | Filmed | | |
| 11111 | | 000 | DEALER'S AUTHORIZED SIGNATURE | | Mailed | | |
| 7 | ALT VI | | X | | *************************************** | | |
| faren a | | | | MPT Sale to a Certified Triba | | | |
| ARVORLICENSEAGONT & NU | MER DE | SUBSCRIBED TO AND SI | the reservation (a | attach notarized statement of n (County) | delivery) | | |
| N 11 ' \ 1 18 4 | William Street | DAY OF DE | CENCER 19 94 | desquist | | | |
| | | OFFIGE APPROVAL: (Not | and the second section of the | | | | |
| ertify that the above | application appea | rs to have been compl | eted correctly, and the appl | icant has sufficient de | ocumentation to | | |
| ceed with the reco | rding of this form. | | appi | n mas sumor all u | Indination to | | |
| Anaela Mc | | SIGNATURA MICO M | | PERATOR NUMBER DATE | 12-91 | | |

DESCRIPTION:

TD-420-729 MANUF HOME APPL (R/2/94)M Page 1 of 2

A tract of land in the East half of the Northeast quarter of the Northeast quarter of Section 34, Township 2 North, Range 6 East of the Willamett, Meridian, in the County of Skamania, State of Washington, described as follows:

Lot 2 of the Warfield Short Plat, recorded in Book 3 of Short Plats, Page 245, Skamania County Records.

BOOK 156 PAGE 552

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 collection, or any coverants, conditions and restrictions under which estate, lien or interest in property has been, or may be, cut off, subordinated or otherwise impaired.

| | 125012 | | BO | OK 156 PA | GE_SSI | |
|--|--|------------------------------|------------------------------|--|---------------------|-------------------|
| STATE OF WASHINGTON DEPARTMENT OF LICENSING | MANUFACTUI APPLICA | | FREEDROFTORCE SKAMANIA CO | ₹ ¢0RD | FILED AT THE RE | QUEST OF: |
| TRANSFER IN LOCATION | nplete all but section 3, below I (Complete ALL sections below POPERTY (Complete all but | ow) | APR 12 12 2 | ory | ADDRESS | |
| MANUFACTURED HOME POPULATE NUMBER YEAR © 78813 1906 LAND | 9 LAMPL WIDT | THILENGTH 4X1Z | GARY M. O | VENICLE IDENTIFICATION | NUMBER (VIN) | |
| ttach a copy of the legal d ssessor's office or it may l lanufactured home will be | be typed or printed on a | an Additional Attac | ument Form () r | nty 0-420-732). PROPER | 179 TAX PARCEL N | JMBER '-0-0100 |
| TITLE COMPANY CERTIF | ICATION | | | | | |
| certify that the legal descr | TITLE COMPANY/PHONE N | IUMBER | SIGNATURE X | N (| DATE | |
| Finalize this application | with a Licensing Agen | t within 10 calenda | r days of the da | te Title Company F | lepresentativ | e signs. |
| BUILDING PERMIT OFFI | CE CERTIFICATION | | | | | - |
| certify that the manufactu | red home has been affi | xed to the real pro | perty as describ | ed, or a building | BLDG PERMIT# | |
| ermit has been issued for | this purpose and the a | ttachment will be in | ispected upon o | completion. | | |
| Ken Baird | SIGNATURE/TITLE | and Bly | BLUG P | ermit office/Phone # * 9) 427-9484 | DATE 7/29 | 1/95 |
| OWNER INFORMATION | TERED OWNERS # LEGAL OW | UEDO Desut e | he Washington () | iver's License or I.D. | FILING FEE | |
| COUNTY # INC UNINC # REGIS | TERED OWNERS # LEGAL OW | | ther (PIC) for each | | T. C. C. | 1 |
| NAME OF FIRST OWNER | <u> </u> | | -10 | 244 | APPLICATION | |
| The state of the s | | T | | - | | 1 |
| William J. Warf | 1eld | | | | MOBILE HOME F | EES |
| | | | | | | 1 |
| Karen L. Warfie. | <u>10 </u> | | | | ELIMINATION | |
| P.O. Box 212 | | | | owner is a business, | | |
| CITY DOX 212 | STATE | ZIP CODE | Identifier (UF | Unified Business 31), found on the | USE TAX | |
| Stevenson | WA | 98648 | business Re | gistration & Licenses | SUB-AGENT FEE | |
| NAME OF FIRST LEGAL OWNER | | | Document. | | SUB-AGENT PEE | |
| Riverview Savin | gs Bank | | | | | |
| MAILING ADDRESS OF FIRST LE | GAL OWN TR | | | o owners or one | TOTAL FEE | S& IAX |
| P.O. Box 1068 | STATE | T ZIP CODE | form(s) #TD | lease use attachment | \$ | 1 |
| CITY | WA | 98607 | DEALER'S REPORT OF SALE | | | |
| Camas | INDICATES CONSENT FOR | | | this information is co | rrect. The vel | nicle is clear |
| FRC REAL PROPERTY: X5 | the Im | BID | of encumbra | inces except as show | n. | 40.00 |
| vers who beautisely makes a false | standarial fact (gui | ity of a felony, and WAD | R NO. | DATE OF SALE | PURCHASE PRE | ondered the |
| on conviction may be cunished | ine of ap 2 10,000 and/or 10 ye | aars imprisonment | | | \$ | indexed, Uir |
| on conviction may be punished. CW 48,12,210). I DO SOLE MAY AT I/WE ARE THE REGIS 25. | IO YTJANIE WENT TO SEPARATA | THIS INFORMA- | R NAME | | TAX JURISDICTION | |
| ON IS ACCURATE: | ows Title | 44. | | 1241100 | 1 | Filmed |
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| The state of the s | | x_ | | | | |
| Jaren Car | CAR PROPERTY | | USET | AX EXEMPT Sale to a C | ertified Tribal mem | ber on |
| (| · · · · · · · · · · · · · · · · · · · | | | ervation (attach notarized s Residing in (County) | tatement of delive | (y) |
| OTAR ADRIGENSE AGENT & NUMBER | STITUTE 27 | BORIBED TO AND SWORN OF DECE | NBEC 19 94 | , issuing in (sound) | 1 d | |

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.

TD-420-729 MANUF HOME APPL (R/2/94)M Page 1 of 2

DESCRIPTION:

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BOOK /56 PAGE 552

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CONTINUED