ase check one		o las pu tor	
TITLE ELIMINATION (Comple	ite all but section 3, below)	SEP 9 1 18 PM '96	ADDRESS
I HANSFER IN LOCATION (C	complete ALL sections below) PERTY (Complete all but section 4,	Delaw	
MANUFACTURED HOME		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	La Carte de
	MAKE WIDTH/LENGTH	GARY M. OLSON	OV NUMBER COM
LAND 1990	MARLETTE 28x	664 #-01222	
tach a copy of the legal desc sessor's office or it may be t anufactured home will be	cription of your land. It can be lyped or printed on an Addition AFFIXED	e obtained from your County onal Attachment Form (TD-420-732).	ERITY TAX FARCEL NUMBUR -08-17-4-0-0
TITLE COMPANY CERTIFICA	TION		
ertify that the legal description	on of the land and ownership	is true and correct per the real property rec	orde
	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
Finalize this application with	h a Licensing Agent with:	Name of the second seco	
		0 calendar days of the date Title Company	Representative sign
rtify that the manufactured I	home has been officed to the	real property as described, or a building	BLDG PERMIT #
	purpose and the attachment	will be inspected upon completion.	
en BAIR	X Ten Boin Ble	(509) 427-9484	DATE
OWNER INFORMATION		1301/42/-4484	6/7/96
NTY NC UNINC REGISTERED	OWNERS # LEGAL OWNERS	Provide the Washington Driver's License or I.D.	FEES
NAME OF FIRST OWNER		card number (PIC) for each owner:	
RAYMOND OT	TIS		APPLICATION
NAME OF SECOND OWNER			MOBILE HOME FEES
ADDRESS O. OWNER	13		
P.O. BOX 750	0	OR if the owner is a business,	ELIMINATION
CITY	STATE ZIP CODE	přovidá tile Unified Business	USE TAX
	WA 986	- Control of College	
CARSON NAME OF FIRST LEGAL OWNER!			SUB-AGENT FEES
CARSON NAME OF FIRST LEGAL CHINER RIVERVIEW S	AVINGS BALL	Document.	OCIDAGEN FEES
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CARSON NAME OF FIRST LEGAL CHYNER' EVERVIEW SA MALING ADDRESS OF FIRST LEGAL CHY P.O. BOX 10 (C	AVINGS BANK	More than two ewners or one llenholder? Please use attachment	TOTAL FEES & TAX
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CARSON NAME OF FIRST LEGAL OWNER' PUERNIEW MAILING ADDRESS OF FIRST LEGAL OWN P.O. BOX IOG CITY CHM AS **SIGNATURE OF LEGAL OWNER INDIGATE FROM REAL PROPERTY: **THATE WHO KNOWINGIJY MAKES a folse statement	AVN 65 BANK NER O 8 STATE ZIPCODE WA 9860 ES CONSENT FOR ELIMINATION OF TITLER AND LENGE AND LONG TO a material fact is guilty of a felony, and	More than two ewners or one lienholder? Please use attachment form(s) #TD-420-732, DEALER'S REPORT OF SALE I certify that this information is corrupted to the control of encumbrances except as shown at the corrupted to the co	TOTAL FEES & TAX
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Lot 4, SHELLY GLEN SUBDIVISION, according to the recorded plat thereof, recorded in Book B of Plats, Page 80, in the County of Skamania, State of Washington.

