



126580

MANUFACTURED HOME  
APPLICATION

BOOK 160 PAGE 437

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 4, below)

RECORDED & CLOCK  
FILED IN RECORD  
SKAMANIA CO. WASH  
BY SKAMANIA CO. TITLE

FILED AT THE REQUEST OF:

(NAME)

ADDRESS

OCT 29 4 12 PM '96

G Lowry  
AUDITOR

GARY M. OLSON

## 1 MANUFACTURED HOME

TPO/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	1996	GOLDEN WEST	66/42	N15713

## 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

04-07-25-30-010500

## 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/HOME 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.

BLOG PERMIT #

NAME	SIGNATURE/TITLE	BLOG PERMIT OFFICE PHONE #	DATE
Ken Baird	X Ken Baird	(509) 427-9484	10/25/96

## 5 OWNER INFORMATION

COUNTY #	IND	UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FILING FEE
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	2	1		

NAME OF FIRST OWNER	JEFFREY BLAISDELL	APPLICATION
---------------------	-------------------	-------------

NAME OF SECOND OWNER	RAE LYNN BLAISDELL	MOBILE HOME FEES
----------------------	--------------------	------------------

ADDRESS OF OWNER		ELIMINATION
------------------	--	-------------

CITY	PARSON	STATE	WA	ZIP CODE	98610	USE TAX
------	--------	-------	----	----------	-------	---------

NAME OF FIRST LEGAL OWNER	ACCUBAND MORTGAGE CORP	SUB-AGENTS FEES
---------------------------	------------------------	-----------------

MAILING ADDRESS OF FIRST LEGAL OWNER	3835 NE HANCOCK ST #101	More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.	TOTAL FEES & TAX
--------------------------------------	-------------------------	--	------------------

CITY	PORTLAND	STATE	OR	ZIP CODE	97218	\$
------	----------	-------	----	----------	-------	----

*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY	X Samuel Churchill	DEALER'S REPORT OF SALE
---	--------------------	-------------------------

Anyone who knowingly makes a false statement or 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 48.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I AM THE REGISTERED OWNER OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.	WA DLR NO.	DATE OF SALE	PURCHASE PRICE
---	------------	--------------	----------------

DEALER NAME		TAX JURISDICTION/TAX RATE
-------------	--	---------------------------

DEALER'S AUTHORIZED SIGNATURE	
-------------------------------	--

<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)
---

NOTARY OR LICENSE AGENT & NUMBER	SUBSCRIBED TO AND SWORN BEFORE ME THIS	Residing in (County)
----------------------------------	--	----------------------

COUNTY AUDITOR	COUNTY 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/FS OPERATOR NUMBER	DATE
Angela Moser	X Angela Moser	20-01-08	10-29-96

**DESCRIPTION:**

**BOOK 160 PAGE 438**

A tract of land in the Southwest Quarter of the Southwest Quarter of Section 25, Township 4 North, Range 7 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

Lot 2 of the STEEL HEAD POINT SHORT PLAT, recorded in Book 3 of Short Plats, Page 187, Skamania County Records.

**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 impaired.

Unofficial  
Copy