



126437

MANUFACTURED HOME
APPLICATION

BOOK 160 PAGE 60

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

Oct 15 11 42 AM '96

P. Lowry
AUDITOR

GARY M. OLSON

FILED AT THE REQUEST OF:

NAME

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 4, below)

1 MANUFACTURED HOME			
TPC/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH
	1996	FLEETWOOD	60 X 28
VEHICLE IDENTIFICATION NUMBER (VIN)			
ORFLT48AB23023-CSI3			

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	
<input checked="" type="checkbox"/> AFFIXED	<input type="checkbox"/> REMOVED
PROPERTY TAX PARCEL NUMBER	
03-08-21-2-0-2904-03	

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	BLDG PERMIT OFFICE/PHONE #	DATE
MARLOW MORAT	X Marlow Morat	BLDG PERMIT OFFICE/PHONE #	9-18-96
FILING FEE			

5 OWNER INFORMATION			
COUNTY #	REG. UNIC	# REGISTERED OWNERS	# LEGAL OWNERS
WA		2	1
Provide the Washington Driver's License or I.D. card number (PIC) for each owner:			
NAME OF FIRST OWNER		REGISTERED	
DANIEL E. BLOVIN		Indexed, Dir	
NAME OF SECOND OWNER		Indirect	
SHERRY L. BLOVIN		Filed	
ADDRESS OF OWNER		Mailed	
P.O. BOX 623			
CITY	STATE	ZIP CODE	
CARSON	WA	98610	
NAME OF FIRST LEGAL OWNER		--OR-- If the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.	
THE CIT GROUP/SALES FINANCING			
MAILING ADDRESS OF FIRST LEGAL OWNER			
P.O. BOX 24610			
CITY	STATE	ZIP CODE	
OKLAHOMA CITY	OK	73124	
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY: X Books Clapps		TOTAL FEES & TAX	
		\$	

Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be imprisoned for up to 5 years and/or 10 years imprisonment (RCW 46.12.210). A person who is convicted of this offense shall be liable for PERJURY LAW. IF WE ARE THE REGISTERED OWNER OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE, I, the undersigned, certify that the information is true and correct.

WA DL#	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 on the reservation (attach notarized statement of delivery)

NOTARY OR LICENSED TITLE AGENT		SUBSCRIBED TO AND SWORN BEFORE ME THIS		Residing in (County)	
X [Signature]		DAY OF JULY		1996	
6 COUNTY AUDITOR/AGENCY 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/VFS OPERATOR NUMBER	DATE		
Angela Moser	X Angela Moser	30-01-08	10-15-96		

Lot 12, ROSENBACH'S CORNER, according to the recorded plat thereof, recorded in Book B of Plats, Page 40, in the County of Skamania, State of Washington.

Unofficial
Copy