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FILED FOR RECORD  
SKIDAWAWASH  
BY CLERK/CLERK

Nov 6 10 39 AM '98

*A. Moser*  
AUDITOR  
GARY M. OLSON

**AFTER RECORDING MAIL TO:**

Name \_\_\_\_\_

Address \_\_\_\_\_

City / State \_\_\_\_\_

**Document Title(s):** (or transactions contained therein)

1. Manufactured Home Application
- 2.
- 3.
- 4.



**Reference Number(s) of Documents assigned or released:**

☐ Additional numbers on page \_\_\_\_\_ of document

**Grantor(s):** (Last name first, then first name and initials)

1. Shields, S. John
- 2.
- 3.
- 4.

5. ☐ Additional names on page \_\_\_\_\_ of document

**Grantee(s):** (Last name first, then first name and initials)

1. State of Washington
2. Department of Licensing
- 3.
- 4.

5. ☐ Additional names on page \_\_\_\_\_ of document

**Abbreviated Legal Description as follows:** (i.e. lot/block/plat or section/township/range/quarter/quarter)

Lot 1, Charles H. & Veda A. Coates Short Plat

☐ Complete legal description is on page 2 of document

**Assessor's Property Tax Parcel / Account Number(s):**

03-08-17-3-0-1402-00

**NOTE:** The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.



# MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK

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 1 below)

1 MANUFACTURED HOME			
TPO/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH
Q51652	1974	TAMARACK	12x60
2 LAND			VEHICLE IDENTIFICATION NUMBER (VIN)
			16496697086355

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

03-08-17-3-0-1402-00

## 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	BLDG PERMIT OFFICE/PHONE #	DATE
Ken Baird	X Ken Baird Bldg Inspector	(509) 427-9484	10/17/96

## 5 OWNER INFORMATION

COUNTY #	INC	UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FEES
	<input type="checkbox"/>	<input type="checkbox"/>		1		
NAME OF FIRST OWNER						FILING FEE
S. JOHN SHIELDS						
NAME OF SECOND OWNER						APPLICATION
ADDRESS OF OWNER						MOBILE HOME FEES
71 BROOKS ROAD						
CITY						ELIMINATION
CARSON						
STATE						USE TAX
WA						
ZIP CODE						SUB-AGENT FEES
98610						
NAME OF FIRST LEGAL OWNER						TOTAL FEES & TAX
RIVERVIEW SAVINGS BANK						
MAILING ADDRESS OF FIRST LEGAL OWNER						
P.O. BOX 1068						
CITY						
CAMAS						
STATE						
WA						
ZIP CODE						
93607						
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY						
[Signature]						
--OR-- If the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.						
062001573						
More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.						
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						
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)						
Residing in (County)						

Anyone who knowingly makes a false statement of 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 4B.12.210). I DO SOLELY ATTEST UNDER PENALTY OF PERJURY LAW THAT I AM THE REGISTERED OWNER OF THE VEHICLE AND THIS INFORMATION IS ACCURATE.

Notary or License Agent's Name and Number

X Deb J. Baumeister

SUBSCRIBED TO AND SWORN BEFORE ME THIS 12th DAY OF JUNE 1996

## 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/IFS OPERATOR NUMBER	DATE
Angela Moser	X Angela Moser	30-01-08	11-5-98

**DESCRIPTION:**

Lot 1, CHARLES H. AND VEDA A. COATES SHORT PLAT, according to the recorded plat thereof, recorded in Book 2, Page 61, Skamania County Short Plat records, located in the Southeast Quarter of the Southwest Quarter of Section 17, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington.