

13299

BOOK 185 PAGE 324

FILED IN RECORD  
SKAMANIA COUNTY WASH  
BY SKAMANIA CO. TITLE

RETURN ADDRESS:

JAN 4 2 25 PM '99

Moser  
GARY W. OLSONMANUFACTURED HOME  
APPLICATION

PLEASE CHECK ONE

☒ TITLE FICATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY

## 1 MANUFACTURED HOME

 TPO/PLATE NUMBER YEAR MAKE/MODEL LENGTH/WIDTH/FEET VEHICLE IDENTIFICATION NUMBER (VIN)  
 1998 67 X 28 H-015631 A/B

## 2 LAND

ADDITIONAL LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDPROPERTY TAX PARCEL NUMBER  
03-08-17-4-0-1800-00

## TITLE FEES

A legal description can be obtained from the local County Assessor's Office. If there is not enough room here, use the Application Attachment form, TD-420-732, available at your local County Auditor's Office.

 A tract of land in the Southeast Quarter of Section 17, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:  
 Lot 2 of the SHORT PLAT, recorded in Book 3 of Short Plats, Page 185, Skamania County Records.

## 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE 3

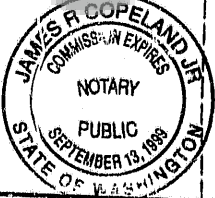
 COUNTY INCORPORATED UNINCORPORATED REGISTERED OWNERS LEGAL OWNERS  
 10  
 NAME OF FIRST REGISTERED OWNER  
 Jeffrey C. Bowman  
 ADDRESS OF FIRST REGISTERED OWNER  
 PO Box 174  
 CITY Stevenson STATE WA ZIP CODE 98648  
 NAME OF FIRST LEGAL OWNER  
 Washington Mutual  
 ADDRESS OF FIRST LEGAL OWNER  
 1201 Main Street  
 CITY Vancouver, STATE WA ZIP CODE 98660  
 GRANTOR(S)  
 NAME OF FIRST GRANTOR  
 ADDITIONAL NAMES ON PAGE 3  
 DOL CUSTOMER ACCOUNT NUMBER  
 5786V9321

 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, imprisonment, or both. (RCW 46.12.210)  
 SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY:

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I / WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

 SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE  
 SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE

NOTARY SEAL OR STAMP



NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

 State of Washington  
 County of Skamania  
 Signed or attested before me on 12-23-98  
 by  
 Printed Name of Applicant  
 No Jary  
 This  
 DEALERSHIP Position (Agent/NOTARY)  
 Signature  
 Dealer No. OR  
 AND County/Office No. OR  
 Notary Expiration Date 9-17-99

DEALER'S REPORT OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

 DEALER NAME  
 PURCHASE PRICE TAX JURISDICTION/TAX RATE DEALER'S AUTHORIZED SIGNATURE WA DEALER NUMBER DATE OF SALE

☐ USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).

 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 (TYPED OR PRINTED) Angela Moser  
 SIGNATURE  
 COUNTY OFFICE/VEHICLE OPERATOR NUMBER  
 DATE 1-4-99

<b>5 TITLE COMPANY CERTIFICATION</b>	
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 / POSITION	DATE
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.	
<b>6 BUILDING PERMIT OFFICE CERTIFICATION</b>	
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	BUILDING PERMIT OFFICE/PHONE #
SIGNATURE / POSITION	DATE
Marlon Morat	909-427-9484
Building Inspector	12-11-98

## INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW,  
DEPENDENT UPON THE TRANSACTION YOU WISH TO PROCESS.

- A. **Manufactured Home Title Elimination Application** (complete boxes 1, 2, 3, 4 and 6). Use to eliminate a title for a manufactured home which is to become real property.
- B. **Manufactured Home Transfer In Location Application** (complete all boxes). Use only when a manufactured home (whose title has been eliminated) is being moved to land with a different legal description AND will become part of the real property to which it will be moved and recorded. If a transfer in location is between two different counties, prepare this form in duplicate and have each recorded in its respective county.
- C. **Manufactured Home Removal From Real Property Application** (complete boxes 1, 2, 3, 4 and 5). Use when titling a manufactured home whose title has been previously eliminated. Once properly completed and recorded, this application becomes a supporting document along with others required to apply for a Certificate of Title for the manufactured home.

**IMPORTANT: SIGNATURES OF THE OWNERS ON THE MANUFACTURED HOME APPLICATION INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 RCW AND INDICATE INTENT TO PERFECT INTEREST IN THE MANUFACTURED HOME AS REAL PROPERTY WITH THE LAND HE/SHE/THEY OWN AND TO WHICH IT IS/ WILL BE AFFIXED. IF THE MANUFACTURED HOME IS BEING REMOVED FROM REAL PROPERTY, SIGNATURES OF THE OWNERS PER THE REAL PROPERTY RECORDS INDICATE CONSENT TO THE REMOVAL. THE FORM MAY THEN BE USED FOR MAKING APPLICATION FOR TITLE WITH THE DEPARTMENT OF LICENSING AS PROVIDED BY CHAPTER 46.12 RCW.**

**Note:** Owners of the manufactured home must own the land when the application is for a Manufactured Home Title Elimination or a Manufactured Home Transfer In Location, as provided by Chapter 46.20 RCW.

**SECTION 1** Enter the description of the manufactured home.

**SECTION 2** Place an "X" in the appropriate box and enter the property tax parcel number, lot, block, plat number and section/township/range, when applicable. Write a legal description in the space provided. If there is not enough room, use the Title Application Attachment (TD0420-732). When processing a "Transfer in Location Application," both boxes should be checked. The application must then be accompanied by two separate land descriptions.

**SECTION 3** This area must be signed by all registered owners of the manufactured home when processing a title elimination. If the manufactured home has been sold and is being removed from the real property, the owners per the real property records must complete this portion to obtain a Certificate of Title. Signatures of the owners must be notarized or certified by the selling dealer or a vehicle licensing agent. Fees will include a filing and application fee plus sales or use tax due. Additional fees may include: a title elimination fee and a Mobile Home Affairs Fee. Subagents will charge an additional service fee. (Fees are subject to change without notice.)

**SECTION 4** Take the properly completed Manufactured Home Application and all necessary supporting documents to the County Auditor/Licensing Agent Office for approval. Supporting documents may include but are not limited to: proof of ownership or a Manufacturer's Statement of Origin (MSO), proof of taxes paid, and applicable release(s) of interest. Subagents may not complete the approval portion of this form.

**SECTION 5** The "Title Company Certification" box must be completed when processing a "Transfer in Location" or a "Removal From Real Property" application. Important: The final recorded application form must be submitted to a vehicle licensing agent within 10 days of the title company's certification.

**SECTION 6** When processing an "Elimination" or "Transfer in Location" application, a city or county office (depending upon the location of the manufactured home) must certify that the home is affixed to the land, issue a building permit to affix the manufactured home to the land, inspecting the completed attachment. The issuing office must sign the application, adding the permit number if the inspection has not yet occurred.

**IMPORTANT:** Once the application has been approved by the County Auditor/Licensing Agent Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.

**APPLICANTS:** Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees.

The Department of Licensing has a policy of providing equal access to its services.  
If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.

## OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK TYPE OF APPLICATION: ☒ Title Elimination  
☐ Removal From Real Property  
☐ Transfer In Location

PROPERTY TAX PARCEL NUMBER: 03-08-17-4-0-1800-00

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)										
NAME OF REGISTERED OWNER Susan F. Bowman	DOL CUSTOMER ACCOUNT NUMBER									
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<table border="1"> <tr> <td rowspan="4">NOTARY SEAL OR STAMP</td> <td colspan="2"><b>NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b></td> </tr> <tr> <td>State of Washington County of _____</td> <td>Signed or attested before me on _____</td> </tr> <tr> <td>by _____ Printed Name of Applicant</td> <td>Signature _____</td> </tr> <tr> <td>Title _____ DEALERSHIP Position/Agent/NOTARY</td> <td>Dealer No. OR AND: County/Office No. OR Notary Expiration Date _____</td> </tr> </table>		NOTARY SEAL OR STAMP	<b>NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>		State of Washington County of _____	Signed or attested before me on _____	by _____ Printed Name of Applicant	Signature _____	Title _____ DEALERSHIP Position/Agent/NOTARY	Dealer No. OR AND: County/Office No. OR Notary Expiration Date _____
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