

136815

BOOK 194 PAGE 939

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

Nov 15 2 04 PM '99

GARY M. OLSON
AUDITOR

RETURN ADDRESS

MANUFACTURED HOME
APPLICATION

PLEASE CHECK ONE

- ☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ REMOVAL FROM REAL PROPERTY

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)

1 MANUFACTURED HOME

TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH (FEET) VEHICLE IDENTIFICATION NUMBER (VIN)
 6139799 99 FLTWD 50 X 27 ORFLX4826127LP13

2 LAND

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
03-08-21-2-0-203-00

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE

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

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS
 30 2 1

NAME OF REGISTERED OWNER

Michael J. Westfall

NAME OF ADDITIONAL REGISTERED OWNER

Janette L. Westfall

ADDRESS

PO Box 734

CITY

Carson

STATE

ZIP CODE

WA

98610

NAME OF LEGAL OWNER

Riverview Community Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS

PO Box 1068

CITY

Camas

STATE

ZIP CODE

WA

98607

GRANTEE

NAME

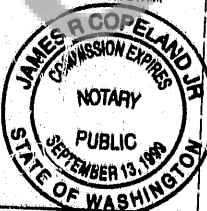
DEPARTMENT OF LICENSING

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of SkamaniaSigned or attested
before me on July 26, 1999by Michael Westfall
PRINT NAME OF REGISTERED OWNER

Signature [Signature]

by Janette Westfall
PRINT NAME OF REGISTERED OWNER

Signature [Signature]

Title Notary
DEALERSHIP POSITION (AGENT/NOTARY)PRINTED NAME OF NOTARY James R. Copeland Jr.
County/Office No. OR
Deale. No. OR
Notary Expiration Date 9-13-99

4 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.
 NAME (TYPED OR PRINTED) 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.
 5 BUILDING PERMIT OFFICE CERTIFICATION

I certify that: ☐ the manufactured home has been affixed to the real property as described,
☐ a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED)

Marlon Morat

BLDG PERMIT OFFICE/PHONE #

(509) 427-9484

BLDG PERMIT #

30-99

SIGNATURE / POSITION

[Signature]

Building Inspector

DATE

8-4-99

6 SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <u>Kathy L. Peterson VP</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on <u>August 13, 1999</u>	
		County of <u>Skamania</u>			
		by <u>Kathy Peterson VP</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by _____		PRINTED NAME OF NOTARY			
PRINT NAME OF LEGAL OWNER		Title <u>Notary</u>		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>9-13-99</u>	
DEALERSHIP POSITION/AGENT/NOTARY					
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 4 of the 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.					
8 DEALER'S REPORT OF SALE					
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.					
DEALER NAME (TYPED OR PRINTED)			WA DEALER NUMBER		DATE OF SALE
PURCHASE PRICE	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).					
9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)					
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)			COUNTY OFFICE/VFS OPERATOR NUMBER		
<u>Angela Moser</u>			<u>30-01-08</u>		
SIGNATURE <u>Angela Moser</u>			DATE <u>11-15-99</u>		
10. TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>IMPORTANT: Once the application has been approved by the County Auditor / Vehicle Licensing 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.</p> <p>APPLICANTS: Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees. Vehicle licensing subagents charge a service fee.</p> <p>For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.</p>					

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) 684-8385.