

138702

FILED IN THE RECORD
SKAN. CO. WASH
PENNSYLVANIA CO., PENNSY

RETURN ADDRESS

JUL 27 1 53 PM '00

S. M. OLSON
ATTORNEY
GARY R. OLSONSEARCHED
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MANUFACTURED HOME APPLICATION					PLEASE CHECK ONE
STATE OF WASHINGTON Department of Licensing					
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					
TPN / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY
	1999	GreenBr	52 X 28	2191-0319-L AB	
2. LAND MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED REAL PROPERTY TAX PARCEL NUMBER 03-08-17-2-3-0401-00					
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	1		1		
NAME OF REGISTERED OWNER Michele R. Nance NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS	CITY		STATE	ZIP CODE	
PO Box 976	Stevenson		WA	98648	
NAME OF LEGAL OWNER					
Evergreen Moneysource					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS	CITY		STATE	ZIP CODE	
3001 112th Ave. NE #200	Bellevue		WA	98004	
GRANTEE					
NAME					
DEPARTMENT OF LICENSING I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE <i>Michele R. Nance</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE				
Notary Public State of Washington JAMES R COPELAND, JR MY COMMISSION EXPIRES September 13,2003	State of Washington County of <u>Skamokawa</u>	Signed or attested before me on <u>6-20-00</u>			
	Print Name of Registered Owner <i>Michele R. Nance</i>	Signature <u><i>Michele R. Nance</i></u>		NOTARY OR AGENT <u><i>James R. Copeland Jr.</i></u>	
	Print Name of Registered Owner <i>Michele R. Nance</i>	Printed Name of Notary <i>James R. Copeland Jr.</i>		AND: County/Office No. OR Dealer No. OR Notary Expiration Date	
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) <u>Michele R. Nance</u> TITLE COMPANY / PHONE NUMBER <u>509-427-9484</u>					
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: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.					
NAME (TYPED OR PRINTED)	BLDG PERMIT OFFICE/PHONE #	BLDG PERMIT #			
<i>Marlon Morat</i>	509-427-9484	31-00			
SIGNATURE / POSITION	DATE				
<i>Marlon Morat, Building Inspector</i> <u>7-25-00</u>					
TD-410-724 MANUF HOME APPL (F/8/98) OR Page 1 of 2					

BOOK 201 PAGE 164

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 *Angela Moyer, Authorized agent*

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
County of *King*

Signed or attested
before me on *7/17/08*

JOE MOLEY
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
NOVEMBER 19, 2003

Virginia Town
PRINT NAME OF / LEGAL OWNER

Signature *Joe Moyer*
NOTARY C.A. AGENT

PRINT NAME OF LEGAL OWNER
Title *Authorized Agent*
DEALERSHIP POSITION/AGENCY/NOTARY

PRINTED NAME OF NOTARY
County/Office No. **OR**
AND: Dealer No. **OR**
Notary Expiration Date *11/19/08*

7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)

Lot 1 of the Russells Meadow Subdivision recorded in Book B of Plats, Page 102, in the County of Skamania, State of Washington.

Together with an undivided 1/31 interest in the Pond known as Lots 2 & 3 of the Russells Meadow Subdivision recorded in Book B of Plats, Page 102 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*

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)

Angela Moyer

COUNTY OFFICE/VFS OPERATOR NUMBER

30-01-08

SIGNATURE

Angela Moyer

DATE

7-27-08

10 TITLE FEES

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX

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.

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.

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.

*The Department of Licensing has a policy of providing equal access to its services.
If you need special accommodation, please call (360) 902-3500 or TDD (360) 664-8885.*