

138832

BOOK 201 PAGE 612

FILED FOR RECORD
SKAN... WASH
BY Fidelity Nat. Title Co.

Aug 11 2 03 PM '00

Amason
CLERK
GARY J. OLSON

RETURN ADDRESS

Donald E. McClintock

PO Box 55426

Portland OR 97238

MANUFACTURED HOME
APPLICATION

PLEASE CHECK ONE

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

Anyone who knowingly makes a false statement or 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 (MM) (FT) (IN) VEHICLE IDENTIFICATION NUMBER (VIN)
 1999 Guerdon 56 X 26.6 GDSTOR-1799-20928

2 LAND

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
02-05-14-2-2-0113-00

LOT 1 BLOCK HIDEAWAY ON THE WASHOUGAL SECTION/TOWNSHIP/RANGE

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS
 1 1

NAME OF REGISTERED OWNER
 Donald E McClintock

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS CITY STATE ZIP CODE
 16311 Washougal River Road Washougal WA 98671

NAME OF LEGAL OWNER
 Washington Mutual Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE
 5285 SW Meadows Road, Suite 451 Lake Oswego OR 97034

GRANTEE

NAME

State of Washington Department of Licensing

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/WE AWARE 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 Washington Signed or attested before me on 2/22/00

by Donald E McClintock
 PRINT NAME OF REGISTERED OWNER

Signature Connie M. Woods
 NOTARY CLERK

by PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY
 County/Office No. OR
 Declar 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)

TITLE COMPANY / PHONE NUMBER

Connie M Woods

Fidelity National Title of Oregon (503) 292-8777

SIGNATURE / POSITION

Connie M. Woods, Escrow Officer

DATE

2/22/00

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)

BLDG PERMIT OFFICE/PHONE #

BLDG PERMIT #

Morton Morat

509-427-9484

08-00

SIGNATURE / POSITION

Morton Morat, Building Inspector

8-10-00

DATE

TO-420-728 MANUF HOME APPL (R/00) OR Page 1 of 2

| | | | | | |
|--|--|---|--|--------------|------------------|
| 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>Jan Johnson</u> | | | | | |
| Signature of Additional Legal Owner and Title, IF APPLICABLE _____ | | | | | |
| | NOTARIZATION / CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of <u>OREGON</u> County of <u>Clackamas</u> | | Signed or attested before me on <u>6/14/00</u> | | |
| | by <u>Jan Johnson</u> PRINT NAME OF LEGAL OWNER | | Signature <u>Sue J. Lee</u> NOTARY OR AGENT PRINTED NAME OF NOTARY <u>Sue J. Lee</u> | | |
| SUE J LEE NOTARY PUBLIC-OREGON COMMISSION NO. 313587 MY COMMISSION EXPIRES JUNE 15, 2002 | | AND: County/Office No. OR _____ Dealer No. OR _____ Notary Expiration Date <u>6-15-2002</u> | | | |
| 7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office) | | | | | |
| Lot 1, HIDEAWAY ON THE WASHOUGAL, according to the recorded Plat thereof, recorded in Book A of Plats, Page 151, 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 / INSURANCE / 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) <u>Angela Moser</u> | | | COUNTY OFFICE/VFS OPERATOR NUMBER <u>30-01-08</u> | | |
| SIGNATURE <u>Angela Moser</u> | | | DATE <u>8-11-00</u> | | |
| 10 TITLE FEES | | | | | |
| FILED 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> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <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> </div> <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) 664-8885.