

140560

BOOK 207 PAGE 372

FILED FOR JRD
SHEATH ASH
BY SEATTLE CO. TITLE

MAR 5 2 47 PM '01


AUDITOR
GARY M. OLSON

RETURN ADDRESS

CHARTER TITLE CORP.
201 NE PARK PLAZA DRIVE #105
VANCOUVER, WA 98684

ESCROW#100008-CAG

STATE OF WASHINGTON Department of licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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)				<input checked="" type="checkbox"/> TITLE ELIMINATION	
				<input type="checkbox"/> TRANSFER IN LOCATION	
				<input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	1999	GREENBRIAR 28 X 66		2191-0282-L 48	
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 02-05-33-0024-03-00	
LOT	BLOCK	PI AT NAME		SECTION/TOWNSHIP/RANGE SEC 33T2N,R5E	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		ADDITIONAL NAMES ON PAGE	
		2		2	
NAME OF REGISTERED OWNER					
JOE LARRY QUEEN					
NAME OF ADDITIONAL REGISTERED OWNER					
BARBARA A. QUEEN					
ADDRESS					
112 RIVER VIEW DRIVE		CITY	STATE	ZIP CODE	
		WASHOUGAL	WA	98671	
NAME OF LEGAL OWNER					
WASHINGTON MUTUAL					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
12400 SE SUNNYSIDE ROAD		CITY	STATE	ZIP CODE	
		CLACKAMAS	OR	97015	
GRANTEE					
NAME					
TO THE PUBLIC					
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 <i>Joe Larry Queen</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Barbara A. Queen</i>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of CLARK		Signed or attested before me on 3/15/2001			
by JOE LARRY QUEEN AND PRINT NAME OF REGISTERED OWNER		Signature <i>Carol Ann Gaither</i> NOTARY OR AGENT			
BARBARA A. QUEEN PRINT NAME OF REGISTERED OWNER		CAROL ANN GAITHER PRINTED NAME OF NOTARY			
Title ESCROW OFFICER DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 12/15 Notary Expiration Date 2001			
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) CHARTER TITLE CORPORATION		TITLE COMPANY / PHONE NUMBER 360-254-7892			
SIGNATURE / POSITION <i>Carol Ann Gaither</i> ESCROW OFFICER		DATE 3-15-2000			
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 upon completion.					
NAME (TYPED OR PRINTED) Marlon Morat		BLDG PERMIT OFFICE/PHONE # 509-427-9484		DATE 2-2-00	
SIGNATURE / POSITION <i>Marlon Morat</i> Building Inspector		DATE 2-2-2001			

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>Michael McCaulsk Assistant Manager</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER R(S) SIGNATURE			
 <p>OFFICIAL SEAL DANA L. PHILLIPS NOTARY PUBLIC COMMISSION NO. 340140 MY COMMISSION EXPIRES NOV 7, 2004</p>		State of <u>Oregon</u> County of <u>Clatsop</u>		Signed or attested before me on <u>1-17-01</u>	
		Signature <u>Dana L. Phillips</u>		Signature <u>Dana L. Phillips</u>	
		NOTARY OR AGENT		NOTARY OR AGENT	
		PRINTED NAME OF NOTARY		PRINTED NAME OF AGENT	
Title _____		AND: County/Office No. OR _____		Dealer No. OR <u>11704</u>	
DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A PARCEL OF LAND LOCATED IN THE NORTHWEST QUARTER OF THE SOUTHWEST QUARTER OF SECT. 33, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, SKAMANIA COUNTY, WASHINGTON, DESCRIBED AS:					
LOT 3 OF THE KRIEGER SHORT PLAT AS RECORDED IN BOOK 3 OF SHORT PLATS ON PAGE 67, SKAMANIA COUNTY RECORDS.					
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)		OR DEALER NUMBER		DATE OF SALE	
<u>SANTIAN HOMES</u>		<u>98940</u>		<u>4-25-00</u>	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE			
<u>55,095.00</u>		<u>Paula M. Smith</u>			
<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 DEEDS/VEHICLE OPERATOR NUMBER			
<u>B. Cooper</u>		<u>060112</u>			
SIGNATURE		DATE			
<u>B. Cooper</u>		<u>2/14/01</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) 664-8885.