

141213

BOOK 210 PAGE 364

FILED FOR RECORD  
SKAMANIA CO. WASH  
BY CLARK COUNTY TITLE

May 29 1 16 PM '01

Auditor  
GARY M. OLSON

## RETURN ADDRESS

Michael P. Brown  
280 Gropper Rd.  
Stevenson, WA 98648  
Clark Co Title  
Hwy 200 Bell Bu Center  
#69195

STATE OF WASHINGTON  
Department of  
**Licensing**

MANUFACTURED HOME  
APPLICATION

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

## 1 MANUFACTURED HOME

TPD / PLATE NUMBER YEAR MAKE LENGTH/WIDTH/HEIGHT VEHICLE IDENTIFICATION NUMBER (VIN)  
2000 FLEETW 75X 18 IDFLX04A226210M13

## 2 LAND

## ADDITIONAL LEGAL DESCRIPTION ON PAGE 4

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

LOT 8 BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE  
Stevenson Park Addition

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.

See page 4

TITLE FEES  
FILING FEE  
APPLICATION  
MOBILE HOME FEE  
ELIMINATION FEE  
USE TAX  
SUB-AGENT FEES  
TOTAL FEES & TAX

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

## ADDITIONAL NAMES ON PAGE

COUNTY # INCORPORATED UNINCORPORATED # REGISTERED OWNERS # LEGAL OWNERS  
Skamania 1 1

NAME OF FIRST REGISTERED OWNER DOL CUSTOMER ACCOUNT NUMBER  
Michael P. Brown 547219 OR

ADDRESS OF FIRST REGISTERED OWNER CITY STATE ZIP CODE  
280 Gropper Rd. Stevenson WA 98648

NAME OF FIRST LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER  
Countrywide Home Loans, Inc. 13-263179

ADDRESS OF FIRST LEGAL OWNER CITY STATE ZIP CODE  
2435 Fair Oaks Blvd. Sacramento CA 95825

GRANTEE(S) ADDITIONAL NAMES ON PAGE  
The Public STATE OF WASHINGTON, DEPT OF LICENSING

NAME OF FIRST GRANTEE DOL CUSTOMER ACCOUNT NUMBER  
The Public N/A

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)

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 LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: Xm P P B

SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE

SIGNATURE OF FIRST LEGAL 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

OFFICIAL SEAL State of Washington County of Clark

DONNA J. MARCHAND Michael P. Brown

Notary Public-State of Washington Printed Name of Applicant

My Commission Expires 11-9-01 Notary

DEALERSHIP Position/Agent/NOTARY Dealer No. OR AND: County/Office No. OR Notary Expiration Date

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

DEALER NAME SEE PAGE 3 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).

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/FS OPERATOR NUMBER

DATE 5-25-01

<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 <i>Clark County Title</i>	TITLE COMPANY/PHONE NUMBER <i>360-694-4722</i>
SIGNATURE / POSITION <i>Norma G. Marchand - Escrow Officer</i>	DATE <i>1-2-01</i>
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	BLDG PERMIT OFFICE/PHONE #
SIGNATURE / POSITION	DATE

## INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW,  
DEPENDING 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 affixed. If the 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 65.20 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; or, 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.



## RETURN ADDRESS

Michael P. Brown  
 280 Gropper Rd.  
 Stevenson, WA 98648  
 Clark Co. 1866  
 Hazel Hill Br. Allen Jan  
 #69195

STATE OF WASHINGTON Department of <b>Licensing</b>		MANUFACTURED HOME APPLICATION	
<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY			
<b>1 MANUFACTURED HOME</b>			
TPD / PLATE NUMBER	YEAR	MAKE	LENGTH / WIDTH (FEET)
	2000		75X71
		VEHICLE IDENTIFICATION NUMBER (VIN)	
		1DFLX04A236210M13	
<b>2 LAND</b>			
ADDITIONAL LEGAL DESCRIPTION ON PAGE 2			
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
8		Stevenson Park Addition	
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.			
See page 4			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>			
COUNTY #	INCORPORATED	UNINCORPORATED	ADDITIONAL NAMES ON PAGE
Skamania			# REGISTERED OWNERS    # LEGAL OWNERS
NAME OF FIRST REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER	
Michael P. Brown		5482819 OR	
ADDRESS OF FIRST REGISTERED OWNER		STATE    ZIP CODE	
280 Gropper Rd.		WA    98648	
NAME OF FIRST LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER	
Countrywide Home Loans, Inc.			
ADDRESS OF FIRST LEGAL OWNER		RTA #    ZIP CODE	
2435 Fair Oaks Blvd.		CA    95825	
GRANTEE(S)		ADDITIONAL NAMES ON PAGE	
NAME OF FIRST GRANTEE		DOL CUSTOMER ACCOUNT NUMBER	
The Public STATE OF WASHINGTON		N/A	
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)			
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.			
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: <i>xm RPPB</i>			
SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE		SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE	
<i>x</i>		<i>x</i>	
NOTARY SEAL OR STAMP		NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
OFFICIAL SEAL DONNA J. MARCHAND Notary Public - State of Washington My Commission Expires 11-9-01		Washington County of Clark Signed or attested before me on 11-16-00 Signature <i>Donna J. Marchand</i> Dealer No OR AND: County/Office No. OR 11-9-2001 Notary Expiration Date	
DEALER'S REPORT OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown.			
DEALER NAME	WA DEALER NUMBER	DATE OF SALE	
Fleetwood Homes	1173	11/29/01	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
80,704.50		<i>Michael P. Brown</i>	
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)			
<b>4 COUNTY AUDITOR/AGENT LICENSING OFFICE APT: 0VAL: (Not for use by Sub-Agents)</b>			
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 APTS OPERATOR NUMBER	
SIGNATURE		DATE	



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT  
**LEGAL DESCRIPTION OF LAND**

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. 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

Land:

Property Tax Parcel Number 03-07-36-2-4-0500

Legal Description:

That portion of Lot 8 of STEVENSON PARK ADDITION, according to the Official Plat thereof on file and of record in the office of the Auditor of Skamania County, Washington, described as follows:

BEGINNING at a point 500 feet South of the Northwest corner of the Henry Shepard Donation Land Claim, thence South  $74^{\circ}52'$  East 96.5 feet to the initial point of the tract hereby described; thence South  $11^{\circ}25'$  East 155.6 feet; thence North  $85^{\circ}30'$  East 55 feet; thence North  $13^{\circ}05'$  West 140.2 feet; thence North  $76^{\circ}30'$  West 55 feet to the initial point.