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BOOK 212 PAGE 623

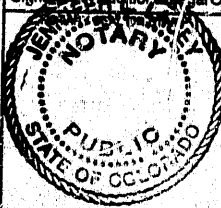
FILED FOR RECORD
SKAMANIA CO. WASH.
BY SKAMANIA CO. TITLE

RETURN ADDRESS

JUL 20 2 03 PM '01

AMISER
AUDITOR
GARY M. OLSON

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 48.12.210)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH x WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2001	Palm	36 X 29	PH204829A	
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				03-08-17-3-0-1416-00	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
2		Terry Mark Short Plat			
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					
Leonard J. Blackledge					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
176 Carson		Carson	WA	98610	
NAME OF LEGAL OWNER					
FLAGSTAR BANK, FSB					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
5151 Corporate Drive		Troy	Michigan	48098	
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				Leonard J. Blackledge	
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 Skamania		Signed and attested before me on 6-28-01			
Notary Public State of Washington JAMES R COPELAND, JR. MY COMMISSION EXPIRES September 13, 2003		Signature of Notary or Agent James R. Copeland Jr.			
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
The		County/Office No. OR Dealer No. OR Notary Expiration Date 9-13-03			
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)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
Marlon Morat		509-427-9484		31-01	
SIGNATURE / POSITION		DATE			
Marlon Morat, Building Inspector		7-18-01			

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>Wesley Campbell</u>					
Signature of Legal Owner and Title, IF APPLICABLE: _____					
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE					
State of <u>Colorado</u> County of <u>Denver</u>		Signed or attested before me on <u>July 9th, 2001</u>			
by <u>Mary C. Campbell</u> PRINT NAME OF LEGAL OWNER		Signature <u>[Signature]</u> NOTARY AGENT			
by _____ PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY <u>Jennifer L. Lacey</u>			
Title _____ DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. 015 Dealer No. OR 03/64/2002 Notary Expiration Date			
					
7 AND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the Southeast Quarter of the Southwest Quarter of Section 17, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 2 of the Terry Mark Short Plat, recorded in Book 3 of Short Plats, Page 305, 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)		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) <u>Angela Moser</u>		COUNTY OFFICE/VPS OPERATOR NUMBER <u>30-01-C8</u>			
SIGNATURE <u>Angela Moser</u>		DATE <u>7-20-01</u>			
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) 902-3600 or TDD (360) 664-8885.

SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER AND GAY/D CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE _____					
Signature of Addressed Legal Owner and Title, IF APPLICABLE _____					
NOTARY PUBLIC OR AGENT		NOTARIZATION CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington County of _____		Signed or Witnessed Before me on _____	
by _____		PRINT NAME OF LEGAL OWNER		Signature _____	
by _____		PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY Commission No. OR Notary Public No. OR Notary Public Date _____	
Title _____		AND: _____		_____	
LAND DESCRIPTION (A legal description of the land must be obtained from the local County Assessor's Office)					
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DEALING'S PROPERTY OF SALE					
(I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN AND NO OTHER TAX HAS BEEN COLLECTED.)					
DEALER NAME AND ADDRESS ON FILE		DEALER NUMBER		DATE OF SALE	
PURCHASER NAME		TAX ASSESSMENT TAX RATE		DEALER'S AUTHORIZED SIGNATURE	
I USE TAX EXEMPT title to a Certified Title member on the reservation of a Manufactured Home Application (delivery).					
COUNTY ALTERNATE LENDING OFFICE APPROVAL (Mark Yes or No)					
County that the application appears to have been completed correctly, and the applicant has submitted documentation to proceed with the recording of this form.					
NAME (PRINT OR PRINTED)		COUNTY OFFICER'S OFFICIAL OR NUMBER			
SIGNATURE		DATE			
TITLE FEES					
PLANS FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBMIT FEE
					TOTAL FEES & TAX
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