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BOOK 216 PAGE 231

FILED IN ORD
SF WASH
BY BRAMANIA CO. TILL

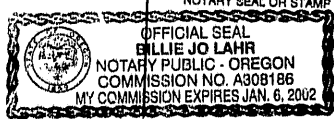
RETURN ADDRESS

OCT 30 11 37 AM '01

GARY M. OLSON

Engineered
Inspected by
Address
Signed
Dated

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 / PLAT / NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
Z057892	1993	FLTWD	28 X 66	ORFLN48AB15191GH	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 03-75-36-3-2-2090-00	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
1		Ridge view Tracts			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
30	2		1		
NAME OF REGISTERED OWNER William R. Jones					
NAME OF ADDITIONAL REGISTERED OWNER Mindy L. Jones					
ADDRESS CITY STATE ZIP CODE 670 NE Bone Road Stevenson WA 98648					
NAME OF LEGAL OWNER Mortgage Market Inc.					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS CITY STATE ZIP CODE 9020 SW Washington Square Dr. #550 Tigard OR 97223					
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 <i>William R. Jones</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Mindy L. Jones</i>					
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 Skamania Signed or attested before me on 10-7-01 Signature <i>[Signature]</i> NOTARY AGENT PRINTED NAME OF NOTARY James R. Copeland Jr County/Office No. OR Dealer No. OR Notary Expiration Date 9-13-07			
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: <input 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 #	
Dave Nail					
SIGNATURE / POSITION		DATE			
<i>Dave Nail</i>		10/29/01			



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 Ganase Chaleon

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Oregon Signed or attested before me on 10/20/01

County of MULTNOMAH

by _____ Signature Billie Jo Lahr

PRINT NAME OF LEGAL OWNER

by _____

PRINT NAME OF LEGAL OWNER

Billie Jo Lahr

PRINTED NAME OF NOTARY

Title _____ AND: County/Office No. OR Dealer No. OR Notary Expiration Date

DEALERSHIP POSITION/AGENT/NOTARY

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

A portion of Lot 1 Ridge View Tracts according to the recorded plat thereof, recorded in Book A of Plats, Page 150, in the County of Skamania, State of Washington, described as follows:
Lot 2 of the Short Plat recorded in Book T of Short Plats, Page 17, Skamania County Records.
Except that portion lying within Road.

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 Moser COUNTY OFFICE/VS OPERATOR NUMBER 30-0108

SIGNATURE Angela Moser DATE 10-20-01

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 fill 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.