## 143495

RETURN ADDRESS

BOOK 219 PAGE 521
FILED FOR PEGORD
SKAM 10, 10 Oct. WASH
BY BEAMANIA CO. TITLE

Jan 22 12 43 PM '02

|  |                   |                         |  | _                    | A  | UDITOR   |
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|  | -                 |                         |  |                      | J. Mic   | chael Garvison   |
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| STATE OF WASHING   | TON               | MANUE                   | CTURED   | 10ME                 | PLEASE   | CHECK ONE  |
| <b>LICENS</b>  | ing               |                         | PLICATION  | I XXITITI            | E ELIMINA<br>INSFER IN L   | TION   |
| Anyone who knowing   | gly makes a fr    | else statement o        | f a material fact is g   | DREN                 | OVAL FRO   | M REAL PROPERTY  |
| or a reiony, and upon  | conviction n      | nay be punished         | by a fine, imprison  | ment, or both. (RC   | (46.12.210 ک <sup>ی</sup>  |  |
| MANUFACTURE  | Court Section 1   |                         |  |                      |  |  |
| TPO / PLATE NUMBER   | YEAR              | MAKE<br>Marlette        | LENGTH/WIDTH(FEET)   | VEHICLE IDENTIFICAT  | ION NUMBER (VII  | y)   |
| 2 LAND   | 2001              | Marlette                | 44 <b>X</b> 26'8   | H-02028              | 7_A/B  |  |
|  |                   |                         | LEGA   | L DESCRIPTION O      | The second secon |  |
| MANUFACTURED HO  | ME WILL BE        | AFFIXED                 | REMOVED  | 03-75-36-            | AX PARCEL NUM  | BER  |
| LOT BLO  | оск               | PLAT NAME               | ······································   | <u> </u>             | SECTIONTOW   |  |
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| 3 GRANTOR(S) REC   | GISTERED/LI       |                         |  | TIONAL NAMES O       |  |  |
| COUNTY NUMBER 30   |                   | NUMBER OF               | REGISTERED OWNERS  | INTIME               | ER OF LEGAL OW   | NERS   |
| NAME OF REGISTERED OW  | NER               |                         |  |                      | 1  | Martine is been been been been been been been bee  |
| DANIEL J. DAV  |                   |                         | 'ما الم  | 8 B                  | 4  |  |
| NAME OF ADDITIONAL REGI  |                   |                         |  |                      |  |  |
| JESSICA A. DA  | VENPORT           |                         |  |                      |  |  |
| ADDRESS<br>PO Box 1145   |                   |                         | CITY   |                      | STATE  | ZIP CODE   |
| NAME OF LEGAL OWNER  |                   | St                      | evenson  |                      | WA 9   | 98648  |
| MORTGAGE MARK  | ET TNC            |                         | h. Th.   | *                    | 4  |  |
| NAME OF ADDITIONAL LEGAL   | LOWNER            |                         | <del></del>  |                      |  |  |
|  |                   | - 10                    |  |                      |  |  |
| ADDRESS  |                   |                         | CITY   |                      | STATE  | ZIP CODE   |
| 9020 SW WASHIN   | NGTON SQU         | JARE DR. #5             | 50 TIGARD  | OR                   |  | 97223  |
| GRANTEE<br>NAME  |                   |                         |  |                      | L 1  | JILLY  |
| DEPARTMENT OF  | TTORNET           | NC.                     |  | 7//~~`               |  |  |
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| PUBLIC   |                   | aniel J.                | Lewen pope   | Signature /          | W Udd 4  | Splaces  |
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|  | DE                | ALERSHIP POSITION       | VAGENT/NOTARY  | AND:                 | County/Office N<br>Dealer N<br>Notary Expiration   | o. or4/24/2005   |
| TITLECOMPANYCE   | RTIFICATION       | V                       | <del></del>  |                      |  | Daie .   |
| certify that the legal desc<br>AMS (TYPED OR PHINTED)  | cription of the i | and and ownersh         | ip is true and correct   | per the real propert | y records.   |  |
| $N = 1 - P_1$  | 10000             |                         | TITLE C  | OMPANY / PHONE NUM   | DER  |  |
| GNATURE POSITION   | mer               | ·                       |  |                      | والمستنان والمستناد  |  |
| Strail.  | MASO              |                         |  |                      | 1.0  | DATE   |
| inalize this rpolication   | with a Licens     | Ing Agent withir        | 110 calendar deve  | I the data Tills Co. | 1-9  | 2-02   |
| BUILDING PEHMIT  | T-FICE CENT       | FICATION                |  |                      |  | rative signs.  |
| cortify that.     th   | e manufacture     | ed home has been        | affixed to the real pr   | operty as described  | <del>,</del>   |  |
| LJa  | building permi    | t nas been Issue 3      | for this purpose and   | the attachment will  | be inspected u   | pon completion.  |
| CAFOR AE   | D KI              | #()                     | PERMIT OFFICE/PHONE  | )                    | BLDG PERMIT  | #  |
| SNATURE / POSITION   | 10                | <u> </u>                | <del></del>  |                      |  | DATE   |
| Dograph.   | J. Clai           | 0                       |  |                      | 1  | 111102   |
| 420-729 MANUF HOME APPL (  | (F/8/98)OR Page   | 1 of 2                  |  |                      |  | 1112 - 1   |

## BOOK 219 PAGE 523

| 6 SIGNATURE OF LEGAL O  | WINER   |   |  |                                  |
|---|---|---|--|----------------------------------|
| SIGNATURE OF LEGAL OWN  | IER INDICATES CONSENT F   | OR ELIMINATION                          | OF TITLE / REMOV                         | AL FROM REAL PROPERT             |
|   | wner and Title, IF APPLICABLE   | 10.0                                    | بقط مستعمده                              | ARKET                            |
| Signature of Additional Legal O   | wner and Title, IF APPLICABLE   | MT .                                    |  | 1                                |
| CONTRACTOR OF THE PROPERTY OF |   |   | FOR LEGAL OWNE                           | P(S) SIGNATURE                   |
| OFFICIAL SEAL<br>BILLIE JO LAHR<br>JRY PUBLIC - ORFJON<br>MISSION NO. ASU 1186  | State of Washington<br>County of  |   | Signed or atte                           | sted                             |
| IGSION EXPIRES JAN 6, 2002  | by  |   | Signature 2                              | cec th                           |
|   | PRINT NAME OF LEGAL OWNER   | r.                                      | BILLIE J                                 | OC LAHR                          |
| en e  | PRINT NAME OF LEGAL OWNE  | _                                       | PRINTED NAME OF N                        | OTARY<br>N/Office No. OR 1-Lo-07 |
| T. AND DECORPORATE  | DEAL: ISHIP FOSITION/AGENT  | MOTARY                                  | Notan                                    | Evolution Date                   |
| LAND DESCRIPTION (A IN  | gal description of the land ca  | n be obtained from                      | n the local County.                      | Assessor's Office                |
| DEALER'S REPORT OF SAI  | LE  |   |  | 1                                |
| I CERTIFY THAT THIS INFOR<br>ANY REQUIRED SALES TAX<br>ALER NAME (TYPED OR PRINTED)   | HAD DEEN COLLECTED.   |   |  |                                  |
|   |   |   | DEALER NUMBER                            | DAYE OF SALE                     |
|   | RISDICTION/TAX RATE DEALER'S  |   | - 10 1                                   |                                  |
| USE TAX EXEMPY Sale   | o to a Certified Tribal member o  | n the reservation (at                   | tach notarized states                    | ment of delivery)                |
| A POLITICIAN CONTRACTOR IN  | FICEUSING OFFICE VASSBO   | /AL: /Not for nea t                     | W Criberandes                            |                                  |
| artify that the above application ap<br>recording of this form.   | opears to have been completed o   | correctly, and the app                  | dicant has sufficient o                  | focumentation to proceed with    |
| ME (TYPED OR PRINTED) MC  | ser   | cou                                     | NTY OFFICE/VFS OPER/                     | ATOR NUMBER                      |
| NATURE )  |   |   | -10-01-                                  | TOATE                            |
| TITLE FEES  | 1080  |   |  | 1-22-02                          |
| NG FEE APPLICATION  | MOBILE HOME FEE   | ELIMINATION FEE                         | USE TAX                                  | SUBAGENT PEEB                    |
|   |   |   |  | TOTAL FEES & TAX                 |
|   |   |   |  |                                  |
| IMPORTANT: Once the   | e application has been app  | proved by the Co                        | unty Auditor / Val                       | hioto                            |
|   |   |   |  |                                  |
| your orig   | proof of the recording fees<br>ginal application form, obta                     | paid. If the Heco<br>in a certified cop | rding Office retair<br>y of the recorded | ns form.                         |
| APPLICANTS:   | Once recorded, you must<br>Manufactured Home Appli<br>licensing subagents charg | return to a Vehic                       | lo I lagratur - W-                       | 4 40 11                          |
| For full instructions of  | n completing this form for<br>on, see form TD-420-730, I                        | TIME CITETION                           | Removal from Re                          | eal Property                     |

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please cal (360) 902-3600 or TDD (360) 664-8885.

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If you need quicket accommodation, places out (200) 953-3600 or 17/20 (200) 964-3600

TO HE TER HANGE HOME APPL PRINCIPAL PAGES OF