FILED FOR REGORD SKAMANIA CO. WASH

					IS THE MANAGER	CO. TITLE
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RETURN ADDRES	is				Ama	- · · · -
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STATE OF WASH Department of			ACTURED H	OME THE	PLEASE CHE LE ELIMINATION	CK ONE
IICEN:	SING	AP	PLICATION	□ TRA	NSFER IN LOCAT	TION
Anyone who know	ringly makes a fal	se statement o	f a material fact is gui	ilty REM	OVAL FROM RE	AL PROPERT
	The second little second littl	ay be punished	by a fine, imprisonm	ent, or both. (RC)	W 46.12.210)	
TPO / PLATE NUMBER			T. T		6.8	
- \$205217	1980	MAKE CEDAR	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATI 6150	ION NUMBER (VIN)	R (
2 LAND				DESCRIPTION O	NPAGE Z	
MANUFACTURED	HOME WILL BE	YXI AFFIXED		DEAL PROPERTY T	AY PARCEL NUMBER	(1) V
LOT	BLOCK	PLAT NAME	☐ NEMCYED	UZ-00-32-	-0-0-020 od:	
	Bioon	LEVI JANUE		- T	S32 T2N	1
GRANTOR(S)	REGISTERED/LE			IONAL NAMES OF	N PAGE _ & 9 0	7
COUNTY NUMBER 30		NUMBER O	OF REGISTERED OWNERS	NUMB	ER OF LEGAL OWNERS	
NAME OF REGISTERED	OWNER				1 13	-
Kevin E. Ky	te					
Terri Kyte	TEGIOTETIES STITE.	- 1				4
ADDRESS		7	CITY		STATE ZIP CO	DE
72 Deville	Drive	SI	kamani <u>e</u>		WA 98648	3
Washington		179	A 7 "	г	-	
NAME OF ADDITIONAL L	EGAL OWNER			·		
ADDRESS						
1201 Main S	treet		Vancouver	- 1	STATE ZIP CO	
GRANTEE			Vancouver		WA 98660	
VAME TO		7			\	
Dapartme DO SOLEMNLY A	ent of Lices	ASING ENALTY OF PE	RJURY THAT I / WE /	AM/ARE THE REC	SISTERED OWNER	E) OF THIS
EHICLE AND THIS	INFORMATION	SACCURATE			1/	3) 95 11119
Signature	of Registered Own	ner and Title, IF.	APPLICABLE		hyp	
Signature of Addition	nel Registered Ow	ner and Title. IF	ADDITION E	Ton it	500	
NOTARY SEALOR	HAVAP.		IONCERTIFICATION	FOR REGISTER	OWNER(S) SIGN	ATURE
Signature of Addition NOTARY SEALARIA P. S.	PENONA State	of Washington	Chamani	10.	orattested L	4
S S S S	State	County of	Skurkanta		foroma on	100
18 40IV	RY SI IN K	Evin E.	Kute	Signature	Mat Box	mace)
PUB		INT NAME OF REGI	STERED DWNER	- Line	OTARY OF AGENT	4
100	20th Carby PR	INT NAME OF REGI	LUTE ISTERED OWNER	PRINTED NAMI	WY. SPE	ncie
"INF. OF W	ASHITTIN Title	Nobre	11 Public	AND:	County/Office No. OR	4/24/05
	DE	ALERSHIP POSITIO	N/ GENT/NOTARY		Dealer No. OR Notary Expiration Dan	11/2
	Y CERTIFICATION description of the l		ship is true and correct	-artha raal proper	47 42 42 42	_
AME (TYPED OR PRINTE	ED)	MIN CITY OFFICE		Der the fall broben OMPANY / PHONE NUM		
IGNATURE / POSITION					DATE	
inaliza this applica	itlen with a Liceni	ing Agent with	iln 10 calendar days o	of the date Title Co	nanv Benragantal	una alagu
BUILDING PERA	MIT OFFICE CERT	IFICATION		·		uve algira;
certify that:	the manufacture	ad home has be	en affixed to the real pr	operty as describe	d.	

BLDG PERMIT OFFICE/PHONE #

6 SIGNATURE OF LEG	AL OWNER								
SIGNATURE OF LEGAL	OWNER INDICATES CONSENT	FOR ELIMINATION	OF TITLE ADEROY	AL EDOMETRAL PROF					
Simmatura				RL PROPE					
Signature of Le	gal Owner and Title, IF APPLICAL	BLE WAY	THE W	M Man					
Signature of Additional e	gal Owner and Title, IF APPLICA	BLE LUNIO	GEOPPD IN	HAOK-					
N TARY SEAL OF ME			FORLESS AND THE						
1 -= 2	State of Weeklanton of	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE							
1 "8525	County of U	ark	Signed or atte	on Jarie , 20					
]] [] []	Kimbul.	4111111111	A #						
1 25581	PRINT NAME OF LEGAL OW	Wilman	Signature Wille	a Kephant Peick					
a avark	by		MOTARY C	_ / .					
1 -4846	PRINT NAME OF LEGAL OW	NER Y	PRINTED NAME OF NO	t-tershing					
4 -011	Title notary Pu	bhc -	Con	Million No. OR					
T AND TO COME TO THE	DEALERSHIP POSITION/AGI	ENT/NOTARY	Notary	Delet No. OR 9-5-04					
LATO DESCRIPTION	(A lugal description of the land	can be obtained from	the local County	Assessor's Office					
tract of and	in the West half -6	and a second of the	be a self of						
f the Northeast	Quarter of Section	32, Township	2 North, Rs	nge 6 Foot of					
		nty of Skaman	ia, State of	Washington.					
escribed as fol	.Lows:	- Tal. 7							
age 141. Skaman	Plat of Short Plat Lia County Records.	recorded in B	ook 3 of Sho	rt. Plats,					
-B- 174) DRAMAL	ata county Records.	. Y							
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		-							
DEALER'S REPORT O	FSALE	· · · · · · · · · · · · · · · · · · ·							
ANY REQUIRED SALES	FORMATION IS CORRECT. THE TAX HAS BEEN COLLECTED.	VEHICLE IS CLEAR	OF ENCUMBRANC	ES EXCEPT AS SHOWN					
LER NAME (TYPED OR PRINT)	ED)		DEALER NUMBER						
				DATE OF SALE					
ICHASE PRICE	AX J JRISDICTIONTAY RATE DEALER	'S AUTHOPIZED SIGNATUR	IE .						
Cluette - veren									
COUNTY AUDITOR/ACT	Sale to a Certified Tribal membe	r on the reservation (att	acard anized statem	ent of delivery).					
recording of this form.	on appears to have been complete	d correctly, and the appl	ican: has sufficient de	ocumentation to proceed w					
E (TYPED OR PRINTED)		and the second second	ITY OFFICENFS OPERA						
Angela III	oser		30-0	~~ D					
ATURE O V	N			DATE					
TITLE FEES	Hose	-		3-12-02					
G FEE APPLICA	TION MOBILE HOME FEE								
	MODILE HOME FEE	ELIMIN/ FION FEE	USE TAX	SUBAGENT FEES					
									
				TOTAL FEES A TAX					
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IMPORTANT: One	e the application has been a	uproved by the Cou	mbe Audlian / Mak	f=1a					
, va.	Chightal application form, on	tain a certified copy	of the recorded t	orm.					
APPLICANTS		it return to a Vehicle	Licensing office	in file the					
			required fees. Vel	io nie the					
	mocroning aubagents chal	ge a service tee.		•					
For full instruction	ns on completing this form for cation, see form TD-420-730	r Title Elimination 5	Semount from the	1.5					
or Transfer in Lo	cation, see form TD-420-730	Manufactured Hom	Application in	roperty					
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The Department of Licensing has a policy of providing equal access to its services. If you need special accommudation, please cal (360) 902-3600 or TDD (350) 664-8885.