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BOOK 226 PAGE 311

FILED FOR RECORD
SKAMANIA CO. WASH
BY Terri Kyte

JUL 10 2 21 PM '02

Amoske

AUDITOR

J. MICHAEL GARVISON

RETURN ADDRESS

Terri Kyte
72 Deville Dr.
Skamania WA 98648

Registered
Notarized
Notarized
Notarized
Notarized

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE <input type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input checked="" type="checkbox"/> REMOVAL FROM REAL PROPERTY	
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/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
+1F 318	1984	Fleetwood	70 X 14	ORFLIAE334803536	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input type="checkbox"/> AFFIXED <input checked="" type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 02-06-32-0-0-0204-00					
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
3		replat of shot plat Book p 141		32/2/6	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
30	2				
NAME OF REGISTERED OWNER Kevin Kyte					
NAME OF ADDITIONAL REGISTERED OWNER Terri Kyte					
ADDRESS		CITY	STATE	ZIP CODE	
72 Deville Dr.		Skamania	WA	98648	
NAME OF LEGAL OWNER Washington Mutual					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
GRANTEE					
NAME Department of Licensing					
I DO SOLELY 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 <u>Kevin E. Kyte</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Terri J. Kyte</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <u>Skamania</u>			
		Signed or attested before me on <u>July 3, 2002</u>			
		by <u>Kevin Kyte</u> Signature <u>Amoske</u> PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT			
		by <u>Terri Kyte</u> PRINT NAME OF REGISTERED OWNER			
		Title <u>Agent</u> PRINTED NAME OF NOTARY DEALERSHIP POSITION/AGENT/NOTARY AND: County/Office No. OR Dealer No. OR 3000-01 Notary Expiration Date			
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			
James R. Copeland JR		Skamania county title 5091			
SIGNATURE / POSITION		DATE			
<u>James R. Copeland JR</u>		7-3-02			
Filed to file 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 #	
SIGNATURE / POSITION		DATE			

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>Jim S. Hyatt</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE <u>Terrill J. Hyatt</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington County of _____		Signed or attested before me on _____	
		by _____ PRINT NAME OF LEGAL OWNER		Signature _____ NOTARY OR AGENT	
		by _____ PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY _____	
		Title _____ DEALERSHIP POSITION/AGENT/NOTARY		AND: County Office No. OR Dealer No. OR Notary Expiration Date _____	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the West half of the East half of the Northeast Quarter of the Northeast Quarter of Section 32, Township 2 North, Range 6 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 3 of the replat of short plat recorded in Book 30 Short Plats, Page 141, 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			
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on _____ 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/VFS OPERATOR NUMBER <u>30-0108</u>		
SIGNATURE <u>Angela Moser</u>			DATE <u>7-10-02</u>		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>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.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> <p>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.</p> </div> <p>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.</p>					

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.