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BOOK 229 PAGE 598

FILED FOR RECORD
SKAMANA CO. WASH
BY WASHINGTON CO. TITLE

SEP 19 2 13 PM '02
amoser
AULTON
J. MICHAEL GALIVISON

RETURN ADDRESS

Expenses
+ Shared In
+ Broker
+ Title

STATE OF WASHINGTON
Licensing
MANUFACTURED HOME APPLICATION

PLEASE CHECK ONE
 TITLE ELIMINATION
 TRANSFER IN LOCATION
 REMOVAL FROM REAL PROPERTY

A felony 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)

MANUFACTURED HOME

TWO-DIGIT STATE NUMBER +255055	YEAR 2002	MAKE Manor	LENGTH/WIDTH (FEET) 67 X 27	VEHICLE IDENTIFICATION NUMBER (VIN) VMHI2826W23866AB
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2 LAND LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER 03-08-20-2-1-0402-00

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE S20, T3N, R9E
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE

COUNTY NUMBER 20	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
Ronald F. Daubenspeck

NAME OF ADDITIONAL REGISTERED OWNER
Betty L. Daubenspeck

ADDRESS CITY STATE ZIP CODE
PO Box 142 Camas WA 98610

NAME OF LEGAL OWNER
Riverview Community Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE
PO Box 1068 Camas WA 98607

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 *Ronald F. Daubenspeck*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Betty L. Daubenspeck*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of **Skamania** Signed or attested before me on **4-8-02**

Notary Public
State of Washington
JAMES R COPELAND, JR
MY COMMISSION EXPIRES
September 13, 2003

PRINT NAME OF REGISTERED OWNER Signature *James R. Copeland*
PRINT NAME OF REGISTERED OWNER **James R. Copeland** NOTARY OR AGENT
PRINTED NAME OF NOTARY
Notary AND: County/Office No. OR 9-17-01
Dealer No. OR
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

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 105-02

SIGNATURE / POSITION DATE
Marlon Morat, Building Inspector 9-12-02

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 <i>James R. Copeland JR</i>						
Signature of Additional Legal Owner and Title, IF APPLICABLE						
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE				
Notary Public State of Washington JAMES R COPELAND, JR MY COMMISSION EXPIRES September 13, 2003		State of Washington	County of <i>Skamania</i>	Signed or attested	Store me on <i>9-18-02</i>	
		PRINT NAME OF LEGAL OWNER		Signature <i>[Signature]</i>	NOTARY OR AGENT	
		PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY <i>James R. Copeland Jr</i>		
		Title <i>Notary</i>		DEALER'SHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR	Dealer No. OR <i>9-17-02</i>
		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 located in the Northwest Quarter of the Northeast Quarter of Section 20, Township 3 North, Range 8 E.W.M., in the County of Skamania, State of Washington, described as follows: Beginning at the Northwest Corner of the NE1/4 of the Said Section 20, thence South 315 feet to the initial point of the tract hereby described; thence East 208 feet; thence South 208 feet; thence West 208 feet; thence North 208 feet to the initial point.						
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 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)		COUNTY OFFICE/VFS OPERATOR NUMBER				
<i>Angela Moser</i>		<i>30-01-08</i>				
SIGNATURE		DATE				
<i>Angela Moser</i>		<i>9-19-02</i>				
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> <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> <p>For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-750, 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 (800) 902-3900 or TDD (360) 684-8885.