

146592

BOOK 232 PAGE 278

FILED FOR RECORD
SKAMANIA CO. WASH
BY CLARK COUNTY TITLE

Nov 14 2 27 PM '02

J. Michael Garvison
Auditor

RETURN ADDRESS

CLARK COUNTY TITLE
Stonemill Professional Plaza
217 S.E. 136th Ave., Suite 104
Vancouver, WA 98684any other
dated by
date
#111111
#111111

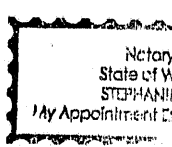
| STATE OF WASHINGTON Department of Licensing | | MANUFACTURED HOME APPLICATION | | PLEASE CHECK ONE | |
|--|--------------|---|--------------------------------|--|--|
| Anyone who knowingly makes a false statement or a material fact is guilty of a felony, and upon conviction may be punished by a fine, 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 / PLATE NUMBER +254710 | YEAR 1999 | MAKE SKYLI | LENGTH/WIDTH (FEET) 66 X 28 | VEHICLE IDENTIFICATION NUMBER (VIN) 21910418MAR | |
| 2 LAND | | | | | |
| LEGAL DESCRIPTION ON PAGE 2 | | | | | |
| MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED | | | | | |
| REAL PROPERTY TAX PARCEL NUMBER 02-05-30-0-3-1805 | | | | | |
| LOT 4 | BLOCK | PLAT NAME OR SECTION/TOWNSHIP/RANGE ROBSON SHORT PLATS | | QUARTER/QUARTER SECTION Sec 30, T2N, R5E WM | |
| 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) | | | | | |
| COUNTY NUMBER SKAMANIA | | NUMBER OF REGISTERED OWNERS 2 | | ADDITIONAL NAMES ON PAGE 1 | |
| NAME OF REGISTERED OWNER MCCUAN, ERIC P. | | DOL CUSTOMER ACCOUNT NUMBER MCCUAEP280Q9 | | | |
| NAME OF ADDITIONAL REGISTERED OWNER MCCUAN, KRISTINA L. | | DOL CUSTOMER ACCOUNT NUMBER MCCUALK277? | | | |
| ADDRESS 382 ROBSON ROAD | | CITY WASHOUGAL | STATE WA | ZIP CODE 98671-7382 | |
| NAME OF LEGAL OWNER WASHINGTON MUTUAL BANK | | DOL CUSTOMER ACCOUNT NUMBER | | | |
| NAME OF ADDITIONAL LEGAL OWNER | | DOL CUSTOMER ACCOUNT NUMBER | | | |
| ADDRESS 1201 MAIN STREET | | CITY VANCOUVER | STATE WA | ZIP CODE 98660 | |
| GRANTEE | | | | | |
| NAME STATE OF WASHINGTON | | | | | |
| 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>Eric P. McCuan</i> | | | | | |
| Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Kristina L. McCuan</i> | | | | | |
| NOTARY SEAL OR STAMP | | NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE | | | |
| T. L. BARRETT NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES JUNE 9, 2004 | | State of Washington County of <i>Clark</i> Signed or attested before me on <i>9/30/02</i> Eric P. McCuan Signature <i>[Signature]</i> Kristina L. McCuan Signature <i>[Signature]</i> T. L. Barrett PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR Notary Expiration Date <i>6/9/04</i> | | | |
| 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) TAMARA BARRETT | | TITLE COMPANY / PHONE NUMBER CLARK COUNTY TITLE 882-9066 | | | |
| SIGNATURE / POSITION | | DATE | | | |
| Finalize this application with a Licensing Agent within 90 calendar days of the date Title Company Representative signs. | | | | | |
| 5 BUILDING PERMIT OFFICE CERTIFICATION | | | | | |
| I certify that: <input checked="" 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) Marlon Morat | | BLDG PERMIT OFFICE/PHONE # 509-427-9484 | | BLDG PERMIT # 271-00 | |
| SIGNATURE / POSITION <i>Marlon Morat</i> | | DATE 11-14-02 | | | |

PAGE 2 of 2

REGISTER OWNER(S): MCCUAN, ERIC P. & KRISTINA L.

LEGAL OWNER: WASHINGTON MUTUAL BANK

MANUFACTURED HOME: 1999 SKYLI 66' 28", VIN# 21910418MAB

| | |
|--|--|
| 6 SIGNATURE OF LEGAL OWNER | |
| SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY. | |
| WASHINGTON MUTUAL BANK | |
| Signature of Legal Owner and Title, IF APPLICABLE BY: LINDA CODI | |
| Signature of Additional Legal Owner and Title, IF APPLICABLE | |
| NOTARY SEAL OR STAMP | NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE |
|  | State of Washington County of Clark Signed or attested before me on 10-14-02 Signature: Stephanie M. Smith PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR Notary Expiration Date 5-17-03 |
| 7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's) | |
| A tract of land in the South half of the Southeast quarter of Section 30, Township 2 North, Range 5 East of the Willamette Meridian, Skamania County, Washington, described as follows: | |
| Lot 4 of ROBSON SHORT PLATS, recorded in Book "3" of SHORT PLATS, page 292, records of Skamania County, Washington. | |
| 8 DEALER'S REPORT OF SALE | |
| I CERTIFY THAT THE 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/VS OPERATOR NUMBER |
| Angela Moser | 30-01-08 |
| SIGNATURE | DATE |
| Angela Moser | 11-14-02 |
| 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 file 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. | |

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 TTY (360) 654-8885.