

146781

BOOK 233 PAGE 245

FILED IN RECORD  
SKAMANIA COUNTY WASH  
BY CLERK OF COUNTY  
SKAMANIA CO, TITLE

DEC 3 3 31 PM '02

J. MICHAEL WILSON

RETURN ADDRESS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Registered  
Advised  
Approved  
Noted

**STATE OF WASHINGTON Department of Licensing** **MANUFACTURED HOME APPLICATION** **PLEASE CHECK ONE**

TITLE ELIMINATION  
 TRANSFER IN LOCATION  
 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 46.12.210)

**1 MANUFACTURED HOME**

TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
853922	1988	FLTWD	66 X 28	ORFLJ48A07928BS

**2 LAND** LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER 03-08-20-4-4-0602-00

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
3		Harrington Short Plat	

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** ADDITIONAL NAMES ON PAGE \_\_\_\_\_

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
30	2	1

NAME OF REGISTERED OWNER  
Martin L. Birkenfeld  
 NAME OF ADDITIONAL REGISTERED OWNER  
Jeanne M. Birkenfeld

ADDRESS	CITY	STATE	ZIP CODE
PO Box 33	Carson	WA	98610

NAME OF LEGAL OWNER  
Wells Fargo Home Mortgage

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS	CITY	STATE	ZIP CODE
1010 SE Everett Mall Way #200	Everett	WA	98203

**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 Martin L. Birkenfeld

Signature of Additional Registered Owner and Title, IF APPLICABLE Jeanne M. Birkenfeld

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**

State of Washington  
 County of Skamania  
 Signed or Attested before me on 2-4-02

by Pamela K. Nebbeck SIGNATURE  
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by Pamela K. Nebbeck SIGNATURE  
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

Title Notary DEALERSHIP POSITION/AGENT/NOTARY AND: County/Office No. OR 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 \_\_\_\_\_

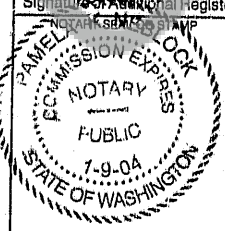
**Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.**

**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 #
<u>Marion Morat</u>	<u>509-427-9484</u>	

SIGNATURE / POSITION Marion Morat Building Inspector DATE 3-19-02



<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <u>Cheryl A. HOFFMAN SECRETARY</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>					
State of Washington County of <u>Snohomish</u>		Signed or attested before me on <u>12/21/02</u>			
by <u>Wells Fargo</u> <small>PRINT NAME OF LEGAL OWNER</small>		Signature <u>[Signature]</u> <small>NOTARY OR AGENT</small>			
by _____ <small>PRINT NAME OF LEGAL OWNER</small>		Signature <u>Shannon Hoffman</u> <small>PRINTED NAME OF NOTARY</small>			
Title _____ <small>DEALERSHIP POSITION/AGENT/NOTARY</small>		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>1/20/03</u>			
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
Lot 3, R. L. Harrington Short Plat, according to the recorded Plat thereof, recorded in Book 3, Page 3, Skamania County Short Plat Records, being a portion of the Southeast Quarter of the Southeast Quarter of Section 20, Township 3 North, Range 8 East of the Willamette Meridian.					
<b>8 DEALER'S REPORT OF SALE</b>					
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).					
<b>9. COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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 Maser</u>			COUNTY OFFICE/VEHICLE OPERATOR NUMBER <u>30-01-08</u>		
SIGNATURE <u>Angela Maser</u>			DATE <u>12-3-02</u>		
<b>10. TITLE FEES</b>					
FILED G FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p><b>IMPORTANT:</b> 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: 5px 0;"> <p><b>APPLICANTS:</b> 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>					