

147131

BOOK 234 PAGE 915

FILED FOR RECORD
SKA... WASH
BY CLARK COUNTY TITLE

DEC 31 3 16 PM '02

Amoser
J. MICHAEL ARKIVISON

RETURN ADDRESS

CLARK COUNTY TITLE
1307-B NE 78TH T. SUITE 12
VANCOUVER, WA 98155
ATTN: JAN SOUTHARD

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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 4B.12.210)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER 2010466	YEAR 1994	MAKE REDMAN	LENGTH/WIDTH (FEET) 66 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 11818987AB	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 02-05-11-2-4-0117					
LOT 17	BLOCK	PLAT NAME HIDEAWAY II		SECTION/TOWNSHIP/RANGE	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER COUNTY	NUMBER OF REGISTERED OWNERS 1		NUMBER OF LEGAL OWNERS 1		
NAME OF REGISTERED OWNER CASTONGUAY, GUY L					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS 17101 WASHOUGAL RIVER ROAD CITY WASHOUGAL STATE WA ZIP CODE 98671					
NAME OF LEGAL OWNER GREEN TREE FINANCIAL CORP					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS 7662 SW MOHAWK CITY TUALATIN STATE OR ZIP CODE 97062					
GRANTEE NAME STATE OF WASHINGTON 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 <i>Guy L. Castonguay</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of <i>Clark</i> Signed or attested before me on <i>10/23/02</i>					
by <i>GUY L. CASTONGUAY</i> PRINT NAME OF REGISTERED OWNER					
by <i>Keri A. Schneider</i> PRINT NAME OF REGISTERED OWNER					
Title <i>NOTARY</i> DEALERSHIP POSITION/AGENT/NOTARY					
AND: County/Office No. OR Dealer No. OR Notary Expiration Date <i>11-19-05</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)					
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: <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) <i>Marlon Morat</i>					
BLDG PERMIT OFFICE/PHONE # <i>509-427-9484</i>					
BLDG PERMIT #					
SIGNATURE / POSITION <i>Marlon Morat</i> Building Inspector					
DATE <i>10-29-02</i>					

147131

BOOK 234 PAGE 915

FILED
SPRINGFIELD, ILL
CLARK COUNTY TITLE

RETURN ADDRESS

Dec 31 3 16 PM '02

Amoser

J. MICHAEL PARVISON

CLARK COUNTY TITLE
1307-B NE 78TH ST. SUITE 12
VANCOUVER, WA 98665
ATTN: JAN SOUTHARD

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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 7010466	YEAR 1994	MAKE REDMAN	LENGTH/WIDTH (FEET) 66 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 11818987AB	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
LOT 17	BLOCK	PLAT NAME HIDEAWAY II	REAL PROPERTY TAX PARCEL NUMBER 02-05-11-2-4-0117		
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COUNTY NUMBER COUNTY	NUMBER OF REGISTERED OWNERS 1		NUMBER OF LEGAL OWNERS 1		
NAME OF REGISTERED OWNER CASTONGUAY, GUY L					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS 17101 WASHOUGAL RIVER ROAD					
CITY WASHOUGAL		STATE WA	ZIP CODE 98671		
NAME OF LEGAL OWNER GREEN TREE FINANCIAL CORP					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS 7662 SW MOHAWK					
CITY TUALATIN		STATE OR	ZIP CODE 97062		
GRANTEE					
NAME STATE OF WASHINGTON 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 <i>Guy L. Castonguay</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of <i>Clark</i>		Signed or attested before me on <i>10/23/02</i>			
by <i>GUY L. CASTONGUAY</i> PRINT NAME OF REGISTERED OWNER		Signature of Notary <i>Keri A. Schneider</i> NOTARY OR AGENT			
by PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY <i>Keri A. Schneider</i>			
Title <i>NOTARY</i> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <i>11-19-05</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)					
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.					
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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) <i>Marlon Morat</i>		BLDG PERMIT OFFICE/PHONE # <i>509-427-9484</i>		BLDG PERMIT #	
SIGNATURE / POSITION <i>Marlon Morat</i>		Building Inspector		DATE <i>10-29-02</i>	

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>Community Lending</u> NAME <u>OK</u> TITLE <u>Authorized Signer</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE					
<div style="border: 2px solid black; padding: 5px; text-align: center;"> MONIQUE A. THAI NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES JULY 20, 2004 </div>		State of Washington County of <u>King</u>		Signed or attested before me on <u>11-5-2002</u>	
		by <u>Community Lending Inc</u> <small>PRINT NAME OF LEGAL OWNER</small>		Signature <u>Monique A. Brayton</u> <small>NOTARY OR AGENT</small>	
		by <u>Jody Jordheim</u> <small>PRINT NAME OF LEGAL OWNER</small>		<u>Monique A. Brayton</u> <small>PRINTED NAME OF NOTARY</small>	
		Title <u>Authorized Signer</u> <small>DEALERSHIP POSITION/AGENT/NOTARY</small>		AND: <u>7-20-2004</u> <small>County/Office No. OR Dealer No. OR Notary Expiration Date</small>	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
LOT 17, HIDEAWAY II, ACCORDING TO THE PLAT THEREOF, RECORDED IN BOOK "B" OF PLATS, PAGE 4, RECORDS OF SKAMANIA COUNTY, WASHINGTON.					
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 Tribe 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 (TYPE OR PRINTED) <u>Angela Moser</u>				COUNTY OFFICE/FS OPERATOR NUMBER <u>30-01-08</u>	
SIGNATURE <u>Angela Moser</u>				DATE <u>12-31-02</u>	
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 TDD (360) 664-8885.