

147580

BOOK 237 PAGE 57

FILED IN RECORD
SPACED WASH
P. WYOMING CO. TITLE

FEB 11 12 02 PM '03

cm
J. MICHAEL SIMONSON

RETURN ADDRESS

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: 2003 MAKE: GR H111 LENGTH/WIDTH (FEET): 66 X 27 VEHICLE IDENTIFICATION NUMBER (VIN): ORFL248A29115-GX13

2 LAND

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER: 03-08-17-2-3-0411-00
LOT: 11 BLOCK: _____ PLAT NAME: Russells Meadow' Sub. SECTION/TOWNSHIP/RANGE: _____

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

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

NAME OF REGISTERED OWNER: Reggie R. Blake

NAME OF ADDITIONAL REGISTERED OWNER: Anita Blake

ADDRESS: PO Box 605 CITY: Stevenson STATE: WA ZIP CODE: 98648

NAME OF LEGAL OWNER: Mortgage Market Inc.

NAME OF ADDITIONAL LEGAL OWNER: _____

ADDRESS: 9020 SW Washington Square Dr. #550 CITY: Tigard STATE: OR ZIP CODE: 97223

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: *Reggie R. Blake*

Signature of Additional Registered Owner and Title, IF APPLICABLE: *Anita Blake*

NOTARY SEAL OR STAMP: _____ NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

Notary Public
State of Washington
JAMES R COPELAND, JRN
MY COMMISSION EXPIRES
September 13, 2003
Signature: *J. R. Copeland*
PRINTED NAME OF NOTARY: James R. Copeland, Jr.
County/Office No. OR: _____
Dealer No. OR: 911802
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 describe 1.
 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 #: 259-02

SIGNATURE / POSITION: *Marlon Morat* Building Inspector DATE: 2-10-03

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 _____
 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 _____	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)

Lot 11 of the Russells Meadow Subdivision, recorded in Book 'B' of Plats, Page 102, in the County of Skamania, State of Washington.
 Together with an undivided 1/31 interest in the pond known as Lots 2 and 3 of the Russells Meadow Subdivision, recorded in Book 'B' of Plats, Page 102 in the County of Skamania, State of 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 OR 1480	DATE OF SALE 10/13/02
PURCHASE PRICE 72,225.00	TAX JURISDICTION/TAX RATE SKAMANIA/T9D	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
SIGNATURE	DATE

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.

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 Kelly Maddox

Signature of Additional Legal Owner and Title, IF APPLICABLE



NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
OFFICIAL SEAL SANDRA NAGEL NOTARY PUBLIC - OREGON COMMISSION NO. A350940 COMMISSION EXPIRES OCTOBER 18, 2005	State of Washington County of _____	Signed or attested before me on <u>2-3-03</u>
	by <u>Kelly Maddox</u> PRINT NAME OF LEGAL OWNER	Signature <u>Sandra Nagel</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	<u>SANDRA NAGEL</u> PRINTED NAME OF NOTARY
	Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>10-18-2005</u>

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DEALER NAME (TYPED OR PRINTED) <u>COLUMBIA GORGE AFFORDABLE HOMES, LLC</u>	MA/DEALER NUMBER <u>1430</u>	DATE OF SALE <u>11/13/02</u>
PURCHASE PRICE <u>72,273.00</u>	TAX JURISDICTION/TAX RATE <u>SKAMANIA 1.7%</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>
<input checked="" 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 Sub-agents)

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/FB OPERATOR NUMBER <u>30-0108</u>
SIGNATURE <u>[Signature]</u>	DATE <u>2-7-03</u>

10 TITLE FEES

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
TOTAL FEES & TAX					

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