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BOOK 252 PAGE 540

FILED FOR RECORD
SKAMANIA, WASH
BY Ron Hopkins

OCT 17 10 52 AM '03

AUDITOR
J. MICHAEL GARVISON

RETURN ADDRESS

Ron Hopkins

P.O. Box 558

WASHOUGA, WA 98671

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 48.12.010)					
1. MANUFACTURED HOME					
TITLE / PLATE NUMBER E 263525	YEAR 2000	MAKE FLTWO	LENGTH x WIDTH (FEET) 24 X 52	VEHICLE IDENTIFICATION NUMBER (VIN) 0RFLX48X826784MH13	
LAND LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER 03-07-36-1-3-2001-00		
LOT #2	BLOCK	PLAT NAME Shoell Short Plat	SECTION/TOWNSHIP/RANGE 36 / 3 North / 7 East		
2. GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER 30	NUMBER OF REGISTERED OWNERS 1		ADDITIONAL NAME: ON PAGE		
NAME OF REGISTERED OWNER Ronald L Hopkins					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS P.O. Box 558		CITY WASHOUGA	STATE WA	ZIP CODE 98671	
NAME OF LEGAL OWNER Ronald L Hopkins					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
GRANTEE					
NAME State of Washington Dept of Lic					
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE			Ronald L Hopkins		
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
State of Washington County of Skamania		Signed or attested before me on 10-13-03			
by Ronald L Hopkins PRINT NAME OF REGISTERED OWNER		Signature [Signature] NOTARY OR ALTERNATE			
by PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title Agent DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No OR Dealer No OR Notary Expiration Date 300008			
3. 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.					
4. 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) DAVE NAIL		BLDG PERMIT OFFICE/PHONE # 509-422-5970		BLDG PERMIT # 03-001	
SIGNATURE / POSITION Dave Nail		Building Inspector		DATE 10/14/03	

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 _____		County Office No. OR _____ Dealer No. OR _____ Notary Expiration Date _____	
		DEALERSHIP POSITION/AGENT/NOTARY _____			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
<p>LOT 2 of The Shoell Short Plat recorded in Book T of Short Plats page 33, Skamania county Records.</p>					
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) <i>Peggy Lowry</i>			COUNTY OFFICE/VFS OPERATOR NUMBER <i>300106</i>		
SIGNATURE <i>Peggy Lowry</i>			DATE <i>12/17/03</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> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> <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> </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>					

The Department of Licensing has a policy of providing equal access to its services.
If you need special accommodation, please call (360) 802-3800 or TDD (360) 864-8885.