BOOK 253 PAGE 324

FILED FOR BECORD SKAMA: 100, WASH BY Karl Kagarise. Oct 28 12 ~~ Dil enn

IETURN ADDRESS					001 20			
Karl Kagarise					Amosia			
					J. MICHAEL GARVISON			
The Dall	es OR	97058	>		•noi	WEE BAKAR	OUN	
THE DAIL	<u> </u>	. /		-	! <u>"</u>	117171	/	
				-		2384 100/		
				-		reich		
					**	-		
Described of MASHINGTO Described of MASHINGTO DESCRIPTION OF THE PROPERTY OF T	<u>NG</u> makes a false	APP statement of a	CTURED I LICATION material fact is g y a fine, imprison	ulity	TITLE ELIM TRANSFER REMOVAL	IN LOCATION FROM FIEAL F	1	
MANUFACTURED								
	YEAP MA 2003 S		ENGTHWIDTH(FEET)	019	1-0465	-RAB	AREA CONTROL	
LAND		7	LEG/		TION ON PAGE	Commence of the Commence of th		
MANUFACTURED HOLO		PLAT NAME		1/4.1.	214	NTOWNSHIP/RANGE	, -	
G+10 GRANTOR(S) REG	OTENENA EN	Duncas		dartio	MES ON PAGE	2North	6 East	
GRANTOR(S) REG	19 I ENEWLEG		REGISTERED OWNER		NUMBER OF LE	BAL DWNERS		
<u> </u>	0							
AME OF REGISTERED OWN  KGYL KAGA  AME OF ADDITIONAL REGIS	1		$T\Delta $	<u>. T.</u>		i ja ti	i, sa,	
AME OF ADDITIONAL BEGIS	TERED OWNER			-			L	
P. O. B.ox	98	TI	ne Palles	V	OP	TE ZIP 000E	-8	
AME OF LEGAL OWNER	,							
AME OF ADDITIONAL LEGAL	. OWNER							
OCRESS		V	CITY		STA	TE ZIP CODE		
GRANTEE								
State of 1	Nashine	ton Do	Partmen-	t of 1	icensin	9		
DO SOLEMNLY ATTE	SY UNDER PEI	VALTY OF PE	JURY THAT I/W		THE REGISTER	ED OWNER(S) C	F THIS	

Signature of Flagistered Owner and Title, IF APPLICABLE

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE Signed or attested State of Washington before me on County of c PRINTED NAME OF NOTARY

County/Office No. OR ON OR Notery Expiration Date AND: Title 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)

SIGNATURE / POSITION

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

**BUILDING PERMIT OFFICE CERTIFICATION** 

ithe 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 I certify that:

BLDG PERMIT . BLDG PERMIT OFFICE/PHONE 96-02 <u>509-427-9484</u>

DATE 0-8-07

## BOOK 253 PAGE 325

SIGNATURE OF LEGAL O	WNER						DEAL BROSE				
SIGNATURE OF LEGAL OWN	ER INDICATE	ES CONSENT FOR I	ELIMINATION	OF TITE	E/REMOVAL	FROM	REAL PROPERTY.				
Signature of Legal Owner and Title, IF APPLICABLE											
Signature of Additional Legal O	wner and Title.	IF APPLICABLE									
NOTARY SEAL OR STAMP		NOTARIZATIONCE	RTIFICATION	FORLE	GAL OWNER(S	s) SIGN	ATURE				
•	Signed or attested						# 1				
		ounty of	<u></u>		ं before me o	n					
	<u> </u>			Signa	ture						
** · · ·	E. WIT NA	ME OF LEGAL OWNER			NOTARY OR	AGENT					
· · · · · · · · · · · · · · · · · · ·	by	ME OF LEGAL OWNER		PRIMI	ED NAME OF NOTA	AY ,					
		ALL LEGISLE STRIKEN			AND: County/O	Hice No	. OR				
	DEALERS	HIP POSITION/AGENT/NO	TARY		Notary Ex	piration	Date				
7 LAND DESCRIPTION (A R	egal descripti	ion of the land can t	e obtained fr	cin the k	ocal County As	50000	's Office				
Lots 9 and 10	of Dan	can Creek	Addition	1 ace	ording to	the	official:				
Nak Harris	<i>C</i> 1	10	1		ce ",	, ,,,	UN" Cali				
plat thereof on	tile as	of tecon	y at p	age.	07 04 6	ook	- r o+ plats,				
records of skal	mania (	ounty, was	shing tan	, Sai	d real pr	ساء	ty being				
records of skal located in sect	in 34	Tour still	2 N	44. C	lane 6.	Ens	+ of The				
Lillama Ela Ma	- d -	Char	1 7 64	17"	0		-				
Williamette Me	maian	ramania	County	1 ma	4 martin						
						_					
8 DEALER'S REPORT OF S	MALE TOMATION IS	CORRECT THE VE	HICLE IS C'	EAR OF	NCUMBRANC	ES EXC	EPT AS SHOWN.				
ANY REQUIRED SALES TO	AX HAS BEE	N COLLECTED.		The same and the same			E OF BALE				
DEALER NAME (TYPED OR PRINTED)		<b>)</b> -	1	WA OEJU	ER NUMBER	DAT	E WY OPLE				
PURCHASE PRICE TAX	JURISDICTION	TAX RATE DEALER'S A	UTHORIZED SIG	NATURE"	7						
	-	4		h		3					
USE TAX EXEMPT	Sale to a Certif	Red Tribal imember or	the race/valk	n (attach	notarized statem	rent of	dem/ery).				
G COUNTY AUDITOR/AGE	nt Licensin	G OFFICE APPROV	AL: (Not for	anches	i Dagents) v hae ai Miciani ri	ocume	ntation to proceed with				
I certify that the above application the recording of this form.	n appears to he	KAR Decu combiesed o	Criticay, aind 10								
NAME (TYPED OR PRINTED)				COUNTY	OFFICENES OPERA	UM ROTA	MRER				
AnaEla Yn	D261			<u> </u>	00-0						
SIGNATURE	11200					17	56-85-				
TITLE FEES	MANA	<u> </u>	سندست ترويسين								
FILING FEE APPLICAT	TION	MOBILE HOME FEE	ELIMINATION	FEE	USE TAX		NUBAGENT FEES				
					1		TOTAL FEES & TAX				
,	•						I SIMITED WITH				
IMPORTANT: One	e the applic	ation has been ap	proved by th	ne Coun	ty Auditor / Ve	hicle					
i ios	eneina Office	i, take vour applic	ation form to	the Co	unty Hecorain	g Unk	:e.				
Ret	ain proof of	the recording feet plication form, ((b)	paid. If the	d copy o	ng Onice retainst the recorder	ins d form					
you					A COLUMN TO THE PARTY OF THE PA						
APPLICANT	S: Once re	ecorded, you must actured Home App	t return to a	Vehicle	Licensing office	ce to f /ehicle	iie the				
1	Manufa	ictured Home App ng subagents char	ncation, pay	ing an R 100.	Manan Iacs: /	. 61 11013					
<u> </u>	عرب استخبان				enioid for f	نسست اد انجاد					
For full instruction	ons on comp	leting this form for form TD-420-730,	r i me Elimin Manufactur	ation, H ad Hom	e Application	instrux	ctions.				
Of Hansiel III Lo	wallon, aco	101111111111111111111111111111111111111				1_					

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please cal (360) 902-3600 or TDD (360) 664-8895.