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BOOK 255 PAGE 263

FILED
SPRINGFIELD WASH
B. STAMANIA CO. WASH

RETURN ADDRESS

DEC 8 1 21 PM '03

J. MICHAEL WILSON

17 STATE OF WASHINGTON
Department of
Licensing

MANUFACTURED HOME APPLICATION

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 46.42.210)

PLEASE CHECK ONE

☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ REMOVAL FROM REAL PROPERTY

1 MANUFACTURED HOME

TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN)

Z109008 1995 FLTWD 40 X 60 ORFLR48AB19227LP

2 LAND

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

REAL PROPERTY TAX PARCEL NUMBER
03-09-14-2-0-1

LOT BLOCK PLAT NAME OR SECTION/TOWNSHIP/RANGE QUARTER/QUARTER SECTION

1 1 Evergreen Park

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

ADDITIONAL NAMES ON PAGE 2

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF OWNERS

30 2

NAME OF REGISTERED OWNER

Gary L. Manning

NAME OF ADDITIONAL REGISTERED OWNER

Jessica R. Manning

ADDRESS CITY STATE ZIP CODE

PO Box 731 White Salmon WA 98672

NAME OF LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER

Riverview Community Bank

NAME OF ADDITIONAL LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER

ADDRESS CITY STATE ZIP CODE

PO Box 1068 Camas WA 98607

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

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skamania Signed or attested before me on 11/26/03

by Gary L. Manning Signature Julie A. Andersen

by Jessica R. Manning Signature Julie A. Andersen

PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title 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 #

Marlon Morat 509-122-9484

SIGNATURE / POSITION DATE

Marlon Morat Building Inspector 12-1-03

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
			X		
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 <i>James R. Copeland JR</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE					
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on <i>December 1, 2007</i>	
		County of <i>Skamania</i>		Signature <i>James R. Copeland JR</i>	
		PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY	
		PRINT NAME OF LEGAL OWNER		COUNTY/OFFICE No. OR	
		Title <i>Notary</i>		Dealer No. OR <i>9-13-07</i>	
		DEALER/SHIP POSITION/AGENT/NOTARY		Notary Expiration Date	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A part of Lot 3 Oregon Lumber Company Subdivision, according to the recorded plat thereof recorded in Book 'A' of Plats, Page 29, in Section 14, Township 3 North, Range 9 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows:					
Lot 1 of the Evergreen Park Short Plat, recorded in Book 3 of Short Plats, Page 121, Skamania County Records.					
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)			COUNTY OFFICE/VS 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 TTY (360) 664-8885.