

# MANUFACTURED HOME TITLE ELIMINATION APPLICATION (TITLE TO REAL PROPERTY)

Manufactured Home:	<b>117933</b>	BOOK <b>139</b> PAGE <b>458</b>
Year	1993	Make Winterhaven Width 52' Length 27'
Vehicle Identification Number <u>WH12552</u>		
Registered Owners:		
Names	Donald A. & Joan M. Lawty	Signatures: <i>Donald A. Lawty</i> <i>Joan M. Lawty</i>
Legal Owners:		
Names	Washington Mutual Savings Bank	Signatures: <i>Harry King</i>
<small>*SIGNATURES OF OWNERS INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 RCW AND INDICATE INTENT TO PERFECT INTEREST IN THE MANUFACTURED HOME AS REAL PROPERTY WITH THE LAND HE/SHE/HEY OWN AND TO WHICH IT IS/AS BEING AFFIXED.</small>		

Land to Which Manufactured Home is Being Affixed:	
Property Tax Parcel Number	02-05-33-0-0-1200-00
<small>Lot 2, of the Merle and Betty Heater Short Plat, recorded in Legal Description Book 1, Page 29, Skamania County Short Plat Records.</small>	
Owners' Names	Donald A. & Joan M. Lawty
Signatures:	<i>Donald A. Lawty</i> <i>Joan M. Lawty</i>
<small>*SIGNATURES OF OWNERS INDICATE CONSENT TO HAVE THE MANUFACTURED HOME ADDED TO THE REAL PROPERTY USED ABOVE.</small>	

Building Permit Office Certification:	
<small>ISSUED 11/2/93</small>	
<small>I certify that the manufactured home has been affixed to the real property as described above and/or building permit number <u>2861</u> has been issued for the purpose of affixing the manufactured home to the land and will be inspected upon completion.</small>	
NAME	SIGNATURE
<i>Kenneth Baird</i>	<i>Courthouse Annex</i>
	BLDG PERMIT OFFICE
DATE	PHONE NUMBER
11/3/93	427-9484

County Auditor/Agent Licensing Office Approval: (Not for use by subagents)	
<small>I certify that the above application appears to have been completed correctly, and that the applicant has sufficient documentation to proceed with the recording of this form.</small>	
NAME	SIGNATURE
<i>V. SALIENSEN</i>	<i>V. Saliesen</i>
	OFFICE/CAAP OPERATOR
DATE	FILED FOR RECORD
11/12/93	SKAMANIA CO. WASH
	SKAMANIA CO. TITLE

Recording Office:	
<small>Nov 12 3 36 PM '93</small>	
<small>I certify that this form has been recorded in the county records.</small>	
NAME	SIGNATURE
<i>Patty Lowry</i>	<i>P. Lowry</i>
	AUDITOR
COUNTY	DATE
Skamania	11/12/93
	GARY M. OLSON
	RECORDING NUMBER
	117933

Note: Every person who falsifies or intentionally omits material information required in an affidavit is guilty of a gross misdemeanor punishable in accordance with RCW 9A.20.021.