

118220

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## MANUFACTURED HOME APPLICATION

 FILED ON A FILED  
 SKAMANIA CO WASH  
 BY Susan Cady

Dec 14 11 20 AM '93

 GARY M. OLSON  
 COUNTY AUDITOR

## TITLE OPTIONS

☐ Original  
☐ Transfer  
☐ Duplicate  
☐ Release

 TITLE ELIMINATION (Complete all but section 3, below)  
 TRANSFER IN LOCATION (Complete ALL sections below)  
 REMOVAL FROM REAL PROPERTY (Complete all but section 4, below)

|   |              |                      |                  |                     |                            |                                    |
|---|--------------|----------------------|------------------|---------------------|----------------------------|------------------------------------|
| 1 | YEAR<br>1992 | MODEL<br>GOLDEN WEST | WIDTH<br>27 X 56 | HEIGHT<br>WH 112/18 | SEAL OF<br>TOP OR<br>FRONT | SEAL OF<br>BOTTOM OR<br>REAR COILS |
|---|--------------|----------------------|------------------|---------------------|----------------------------|------------------------------------|

|                                                                                                                                                                                                                                               |      |                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------------------------------------------------|
| 2                                                                                                                                                                                                                                             | LAND |                                                  |
| • Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.<br>• Land to which the manufactured home is being: <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED |      | PROPERTY TAX PARCEL NUMBER<br>02 05 30 00 110400 |

|                                                                                                                                            |                             |           |
|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------|
| 3                                                                                                                                          | TITLE COMPANY CERTIFICATION |           |
| I certify that the legal description of the land and ownership are true and correct.                                                       |                             |           |
| NAME                                                                                                                                       | DATE                        | SIGNATURE |
|                                                                                                                                            |                             | X         |
| NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative. |                             |           |

|                                                                                                                                                                                                   |                                      |                          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|--------------------------|
| 4                                                                                                                                                                                                 | BUILDING PERMIT OFFICE CERTIFICATION |                          |
| I certify that the manufactured home has been affixed to the real property as described, or the following building permit has been issued for this purpose and will be inspected upon completion. |                                      | PERMIT NUMBER<br>2618    |
| NAME<br>Robert L. Dixon                                                                                                                                                                           | DATE<br>11-22-93                     | SIGNATURE<br>[Signature] |

|                                                                                                                                                                 |                 |             |                                     |                                |                                                                               |                                                      |                                                                                |                                              |                                      |                                                                                              |                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------|-------------------------------------|--------------------------------|-------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------|----------------------------------------------|--------------------------------------|----------------------------------------------------------------------------------------------|-------------------------|
| 5                                                                                                                                                               | COUNTY #<br>[ ] | SEC.<br>[ ] | NUMBER OF<br>REGISTERED OWNERS<br>1 | NUMBER OF<br>LEGAL OWNERS<br>1 | Please provide the Department of Licensing with a "SPRINKLER" for each owner. | NAME OF<br>FIRST REGISTERED OWNER<br>ROBERT L. DIXON | ADDRESS OF<br>FIRST REGISTERED OWNER<br>1054 E. PIONEER RD.<br>DRAPEA UT 84020 | NAME OF FIRST LEGAL OWNER<br>ROBERT L. DIXON | ADDRESS OF FIRST LEGAL OWNER<br>SAME | DATE<br>11-22-93                                                                             | APPROVED<br>[Signature] |
| This "SPRINKLER" may be found on your Washington Sales License L.S. Card - 22- If the owner is a business, provide the United business identifier (UBI) number. |                 |             |                                     |                                |                                                                               |                                                      |                                                                                |                                              |                                      | How many times registered or one legal owner? ...<br>Please use attachment form (TS-400-700) |                         |
| I certify that the information is correct. The vehicle is shown as shown.                                                                                       |                 |             |                                     |                                |                                                                               |                                                      |                                                                                |                                              |                                      | TOTAL FEE & TAX<br>\$                                                                        |                         |

|                                                                                                          |  |                                                                                                      |  |                                            |  |
|----------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------|--|--------------------------------------------|--|
| I certify that the above information is true and correct, and the applicant is the owner of the vehicle. |  | OWNER'S REPORT OF SALE<br>I certify that this information is correct. The vehicle is shown as shown. |  | INDEXED, LIT<br>INDEXED<br>FILED<br>MAILED |  |
| X [Signature] Owner                                                                                      |  | X [Signature]                                                                                        |  | X [Signature]                              |  |

|                                                                                                          |  |          |  |
|----------------------------------------------------------------------------------------------------------|--|----------|--|
| I certify that the above information is true and correct, and the applicant is the owner of the vehicle. |  |          |  |
| 118220                                                                                                   |  | 30 01 06 |  |
| 12/14/93                                                                                                 |  | 12/14/93 |  |

## ASSINORY

## SKAMANIA COUNTY ASSESSOR INQUIRY

11-18-93

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parcel# 02 05 30 0 0 1104 00 tca 100

taxpayer# 45950

PIXTON, ROBERT L

bk/pg 123/394 ext

chng 09/10/1993

inspt 12/03/1990

seg 02 05 30 0 0 1102 00

situe

mrtg 0

annup 05/21/1993

MOBILE

1054 E. PIONEER ROAD  
DRAPER, UTAH

84020

legal LOT 2 BILL FALLON SP BK 3 PG 150 12/15/89

1992 GOLDEN PACIFIC 27X56 WH 11218

area 2 : gorge zoning R10 neighhd WA1 fire acres 3

|         | use | acres | land   | imp | new land | new imp | market |
|---------|-----|-------|--------|-----|----------|---------|--------|
| regular | 11  | 2.69  | 18,500 |     | 3,500    | 45,000  |        |
| totals  |     | 2.69  | 18,500 |     | 3,500    | 45,000  | 67,000 |

| taxable acres | 2.69 | taxable value | 67,000 | total market | 67,000 |
|---------------|------|---------------|--------|--------------|--------|
|---------------|------|---------------|--------|--------------|--------|

## SALES

| date       | excise | vol/page | inst | price/del | seller           |
|------------|--------|----------|------|-----------|------------------|
| 10/21/1991 | 14668  | 126/291  | QCD  |           | PIXTON, CHARLA   |
| 05/13/1991 | 14304  | 123/394  | REC  | 16,250    | SIDES AND FALLON |
|            |        | 116/525  |      |           |                  |

## HISTORY

| Yr   | type | tca | ex | lu | acres | land   | improve | new | market | pen% | hoh |
|------|------|-----|----|----|-------|--------|---------|-----|--------|------|-----|
| 1992 | REG  | 101 |    | 97 | 2.69  | 15,500 |         |     | 15,500 | 0    | 0   |
| 1991 | REG  | 101 |    | 97 | 2.69  | 10,000 |         |     | 10,000 | 0    | 0   |
| 1990 | REG  | 101 |    | 97 | 2.69  | 9,000  |         |     | 9,000  | 0    | 0   |
| 1989 | REG  | 101 |    | 97 | 2.69  | 6,550  |         |     | 6,550  | 0    | 0   |

Lot 2 of the Bill Fallon Short Plat recorded in Book 3 at page 150  
of Skamania County, Washington records.