



MANUFACTURED HOME APPLICATION

TITLE OPTIONS

☐ Original
☐ Transfer
☐ Duplicate
☐ Reissue

☒ **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)

RECORDED & CLOCKED
SKAMANIA CO. WASH
BY 1st Independent

MAR 2 3:49 PM '94

RECORDED AT
REQUEST OF:

P. Savary
AUDITOR

GARY H. OLSON

MANUFACTURED HOME				
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)	COLOR #1 TOP OR FRONT: 1t brown
1979	FLIWD	64/28	IDFL2B938041398	COLOR #2 BOTTOM OR REAR COLOR:

2 **118833** **LAND** **BOOK 741 PAGE 680**
• Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.
• Land to which the manufactured home is being: ☒ AFFIXED ☐ REMOVED
PROPERTY TAX PARCEL NUMBER 3-7-25-3-500

3 **TITLE COMPANY CERTIFICATION**
I certify that the legal description of the land and ownership are true and correct.
NAME: TITLE COMPANY/PHONE NUMBER: SIGNATURE: X DATE:
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.
NAME: Ken Baird SIGNATURE/TITLE: X Kenneth Baird BUILDING PERMIT OFFICE/PHONE NUMBER: 509-427-9484 DATE: 2/28/94

5 **OWNER INFORMATION**
COUNTY # INC UNINC NUMBER OF REGISTERED OWNERS 2 NUMBER OF LEGAL OWNERS 1
Please provide the Department of Licensing (DOL) Sent "NUMBER" for each owner:
NAME OF FIRST REGISTERED OWNER: Hatfield Ralph O H A T F I R O 6 4 9 0 P
NAME OF SECOND REGISTERED OWNER: Hatfield Edith E H A T F I E E 5 8 6 N N
ADDRESS OF FIRST REGISTERED OWNER: MP 1.73 Loop Road
CITY: Stevenson STATE: WA ZIP CODE: 98648
NAME OF FIRST LEGAL OWNER: First Independent Bank.
MAILING ADDRESS OF FIRST LEGAL OWNER: P O Box 8904
CITY: Vancouver, STATE: WA ZIP CODE: 98668
* SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR DATE: 3-2-94
ELIMINATION OF TITLE: X
This "NUMBER" may be found on your Washington Drivers License/ I.D. Card -OR- If the owner is a business, provide the Unified Business Identifier (UBI) number. 0 6 5 0 0 9 9 0 2 1 1
More than two registered or one legal owner? Please use attachment forms (TD-420-732)

DEALER'S REPORT OF SALE
I certify that this information is correct. The vehicle is clear of encumbrances except as shown.
DEALER NAME: VIA DLR NO. DEALER'S AUTHORIZED SIGNATURE: X
PURCHASE PRICE: \$ TAX JURISDICTION/TAX RATE: DATE OF REGISTRATION: Indexed, Dir: Indirect: Filled:
NOTARY OR LICENSE AGENT & NUMBER: X Donna Rush Subscribed and Sworn to Before Me This 2 Day of March 1994 Residing in Skamania County
USE TAX EXEMPT: ☐ See Section on the Reservation (attach if desired statement of EXEMPT)

6 **COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)**
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: Angela Moser SIGNATURE: X Angela Moser OFFICE/PHONE OPERATOR NUMBER: 30-01-08 DATE: 3-2-94

7 **RECORDING OFFICE**
This form has been recorded in the county records.
RECORDING NUMBER: 118833 COUNTY: Skamania VOLUME/PAGE: 141/680 DATE: 3/2/94

All that portion of the Southeast Quarter of the Southwest Quarter of the Southwest Quarter of Section 25, Township 3 North, Range 7 East of the Willamette Meridian, in the County of Skamania, State of Washington, lying East of the County Road known as Farm to Market Road on December 31, 1954, now known as Loop Road.

ALSO all that portion of Lot 9 of IGNAZ WACHTER SUBDIVISION according to the official Plat recorded in the office of the County Auditor of Skamania County, lying Easterly and Southerly of the above said Farm to Market Road, also known as Loop Road.

EXCEPT that portion conveyed to the United States of America for Bonneville Transmission Lines.

ALSO EXCEPT the Bonneville Power Administration Stevenson Substation Entrance Road right of way.

ALSO EXCEPT public road rights of way.

ALSO EXCEPT all that portion of Lot 9 of the IGNAZ WACHTER SUBDIVISION of Section 36, Township 3 North, Range 7 East of the Willamette Meridian, in the County of Skamania, State of Washington, lying Easterly of the center lien of Skamania County Road No. 2060 (Maple Way Road) and Northerly of the Bonneville Power Administration Stevenson Substation Entrance Road right of way and Southwesterly of a line described as follows:

Beginning at a point on the North edge of said entrance road right of way that bears South 61 degrees 33' 30" East, 795.4 feet from a brass cap monumenting the Northwest corner of Section 36; thence North 45 degrees 30' West to the terminus of said line description as recorded in Book 68, Page 807.

ALSO EXCEPT that portion conveyed to Skamania County by instrument recorded March 27, 1989 in Book 113, Page 384.



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SKAMANIA CO. WASH
BY 1st Independent

MAR 2 3:49 PM '94

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REQUEST OF:

GARY M. OLSON
AUDITOR

1 MANUFACTURED HOME					
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)	COLOR #1 TOP OR FRONT	COLOR #2 BOTTOM OR REAR COLOR
1979	FLIWD	64/28	IDFL2B938041398	1: brown	

2 LAND	
118833	BOOK 741 PAGE 680
• Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.	
• Land to which the manufactured home is being: <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED	
PROPERTY TAX PARCEL NUMBER 3-7-25-3-500	

3 TITLE COMPANY CERTIFICATION			
I certify that the legal description of the land and ownership are true and correct.			
NAME	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
		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.			
NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE NUMBER	DATE
Ken Baird	X Kenneth Baird	509-427-9484	2/28/94

5 OWNER INFORMATION					FEES
COUNTY #	INC	UNINC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	
			2	1	
Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner:					
NAME OF FIRST REGISTERED OWNER Hatfield Ralph O					HATFIRO6490P
NAME OF SECOND REGISTERED OWNER Hatfield Edith E					HATFIEE586NN
ADDRESS OF FIRST REGISTERED OWNER SP 1.73 Loop Road					
CITY Stevenson					
STATE WA					
ZIP CODE 98648					
NAME OF FIRST LEGAL OWNER First Independent Bank					
MAILING ADDRESS OF FIRST LEGAL OWNER P O Box 8904					
CITY Vancouver,					
STATE WA					
ZIP CODE 98668					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: X					
DATE 3-2-94					
This "NUMBER" may be found on your Washington Drivers License/ I.D. Card -OR- if the owner is a business, provide the Unified business Identifier (UBI) number. 065009902					
More than two registered or one legal owner? Please use attachment forms (TD-420-732)					
FUNG FEE					
APPLICATION					
MOBILE HOME FEES					
ELIMINATION					
USE TAX					
SUB-AGENT FEES					
TOTAL FEES & TAX					
\$					

6 DEALER'S REPORT OF SALE		PURCHASE PRICE
I certify that this information is correct. The vehicle is clear of encumbrances except as shown.		\$
DEALER NAME		TAX JURISDICTION/TAX RATE
WIA DLR NO.		DATE OF SALE
DEALER'S AUTHORIZED SIGNATURE		Indirect, Dir
X		Indirect
USE TAX EXEMPT		Filed
NOTARY OR LICENSE AGENT & NUMBER		
X Donna Rush		
Subscribed and Sworn to Before Me This		
2 Day of March 1994		
Residing in		
Skamania County		

6 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)			
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	SIGNATURE	OFFICE/PHONE NUMBER	DATE
Angela Moser	X Angela Moser	30-01-C8	3-2-94
RECORDING OFFICE			
This form has been recorded in the county records.			
RECORDING NUMBER	COUNTY	VOLUME/PAGE	DATE
118833	Skamania	141/680	3/2/94