



## MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK

## 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)

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RECORDED AT  
REQUEST OF:

120740

1 MANUFACTURED HOME					
YEAR 1981	MAKE KWOOD	WIDTH/LENGTH 64/24	VEHICLE IDENTIFICATION NUMBER (VIN) 9712	COLOR #1 TOP OR FRONT:	COLOR #2 BOTTOM OR REAR COLOR:

2 LAND

• 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  
04-75-36-0-0-1402-00

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
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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 Dean A. Nygaard	SIGNATURE/TITLE X Dean A. Nygaard / Bldg Insp	BLDG PERMIT OFFICE/PHONE NUMBER Skamania Co 509-421-9484	DATE 9-30-94
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5 OWNER INFORMATION

COUNTY # ☐ INC ☐ UNINC ☐ NUMBER OF REGISTERED OWNERS ☒ 2 NUMBER OF LEGAL OWNERS ☐ 1

Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner:

NAME OF FIRST REGISTERED OWNER DAVID L. WEST	W15174D1518161214	
NAME OF SECOND REGISTERED OWNER GLENDA L. WEST	W15174G11517111421	
ADDRESS OF FIRST REGISTERED OWNER P O BOX 737		
CITY CARSON	STATE WA	ZIP CODE 98610
NAME OF FIRST LEGAL OWNER RIVERVIEW SAVINGS BANK		
MAILING ADDRESS OF FIRST LEGAL OWNER P O BOX 1068		
CITY CAMAS	STATE WA	ZIP CODE 98607

\* SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: X *Michael J. West* 8/11/94

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	WA DLR NO.	DEALER'S AUTHORIZED SIGNATURE X
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PURCHASE PRICE  
\$

TAX JURISDICTION/TAX RATE

DATE OF SALE  
10/05/94

USE TAX EXEMPT ☐ Sale to Indian on the Reservation (attach notarized statement of delivery)

6 COUNTY CLERK AND/OR 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/OPS OPERATOR NUMBER 3001-08	DATE 10/05/94
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7 RECORDING OFFICE

This form has been recorded in the county records.

RECORDING NUMBER 120740	COUNTY Skamania	VOLUME/PAGE 746/254	DATE 10/5/94
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EXHIBIT "A"

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A tract of land in the Southeast quarter of Section 36, Township 4 North, Range 7 1/2 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

Lot 1 of the **Lloyd Louther Short Plat**, recorded in Book 3 of Short Plats, Page 216, Skamania County Deed Records.

Unofficial  
Copy