

120991

MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK
BOOK 146 PAGE 894
RECORDED AT
REQUEST OF:

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 MANUFACTURED HOME

YEAR 1990	MAKE Fuqua	WIDTH/LENGTH 28x60	VEHICLE IDENTIFICATION NUMBER (VIN) 11172	COLOR #1 TOP OR FRONT:	COLOR #2 BOTTOM OR REAR COLOR:
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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
1-5-6-D-106

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 Ken Baird	SIGNATURE/TITLE X Ken Baird Bldg. Inspector	BLDG PERMIT OFFICE/PHONE NUMBER 509-427-9484	DATE 10/27/94
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5 OWNER INFORMATION

COUNTY #	INC	UNINC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner: 491069113	FEES FILED FOR RECORD SKAMANIA CO. WASH B. CLARE COUNTY, ILL MOBILE HOME FEES Nov 3 3 45 PM '94 ELIMINATION P. Savary ABATTORNEY GARY M. OLSON SUB-AGENT FEES TOTAL FEES & TAX \$
NAME OF FIRST REGISTERED OWNER Claudia J. Sayles					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. More than two registered or one legal owner? ... Please use attachment forms (TD-420-732)	
NAME OF SECOND REGISTERED OWNER						
ADDRESS OF FIRST REGISTERED OWNER M. P. 0.35L Ward Road						
CITY Washougal, STATE WA ZIP CODE 98671						
NAME OF FIRST LEGAL OWNER Washington Mutual Savings Bank						
MAILING ADDRESS OF FIRST LEGAL OWNER 1201 Main Street-Closing Dept.						
CITY Vancouver, STATE WA ZIP CODE 98660						
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: <i>How M. No</i> DATE 10-19-94						

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 of up to \$5,000 and/or 10 years imprisonment (RCW 49.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I AM THE REGISTERED OWNER OF THE VEHICLE AND THIS INFORMATION IS ACCURATE:

Claudia J. Sayles
NOTARY PUBLIC
Subscribed and Sworn to before me this 21 Day of Oct 1994

DEALER'S REPORT OF SALE

I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

DEALER NAME	DATE OF SALE
WA DLR NO.	DEALER'S AUTHORIZED SIGNATURE

Residing in *Clack* County

PURCHASE PRICE \$

TAX JURISDICTION/TAX RATE
Registered

DATE OF SALE *Indexed, Dtl*

Registered
 Indexed
 Mailed

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

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	OFFICER'S OPERATOR NUMBER 30-01-08	DATE 11-3-94
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7 RECORDING OFFICE

This form has been recorded in the county records.

RECORDING NUMBER 120991	COUNTY Skamania	VOLUME/PAGE 146/894	DATE 11/3/94
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BOOK 146 PAGE 895

Lot 12, SILVER STAR ACRES, according to the plat thereof, recorded in Book 64, page 167, records of Skamania County, Washington.

Unofficial
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