



MANUFACTURED HOME APPLICATION

Please check one

121271

- ☒ 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)

RECORDERS CLOCK

FILED AT THE REQUEST OF:

NAME

ADDRESS

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1 MANUFACTURED HOME

TYPE/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	1993	KINGW	28X44	GDSTOR138315620

2 LAND

Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office or it may be typed or printed on an Additional Attachment Form (TD-420-732). Manufactured home will be

☒ AFFIXED ☐ REMOVED

PROPERTY TAX PARCEL NUMBER

1-5-5-1-101

3 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
TRACEY TALARICO	CLARK COUNTY TITLE 573-4700	<i>Tracey Talarico</i>	8-10-94

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

4 BUILDING PERMIT OFFICE CERTIFICATION

I certify that the manufactured home has been affixed to the real property as described, or a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE PHONE #	DATE
<i>Don A. Nygaard</i>	<i>Don A. Nygaard Bldg Insp.</i>	562-9412	9-14-94

5 OWNER INFORMATION

COUNTY: <u>30</u>	INC <input type="checkbox"/> UNINC <input checked="" type="checkbox"/>	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FEES
NAME OF FIRST OWNER SUSAN Y. KING					FOR RECORD SKAMANIA CO. WASH CLARK COUNTY TITLE DEC 15 12 29 PM '94
NAME OF SECOND OWNER NOEL W. PLEKANEC					
ADDRESS OF OWNER MP10.80L OLD STATE HWY 140 CITY WASHOUGAL STATE WA. ZIP CODE 98671					ELIMINATION AUDITOR GARY H. OLSON
NAME OF FIRST LEGAL OWNER WASHINGTON MUTUAL SAVINGS BANK					SUB-AGENT FEES
MAILING ADDRESS OF FIRST LEGAL OWNER 1201 MAIN STREET CITY VANCOUVER STATE WA ZIP CODE 98660					TOTAL FEES & TAX
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY. <i>X Susan Y. King</i>					DEALER'S REPORT OF SALE

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 46.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE: Owner Signature(s) & Title(s):

X Noel W. Plekanec
X Susan Y. King
His, Her Attorney in Fact

WA DLR NO	DATE OF SALE	PURCHASE PRICE
		\$ <u>Registered</u>
DEALER NAME		TAX JURISDICTION
		Indirect
DEALER'S AUTHORIZED SIGNATURE		Filmed
		Mailed
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)		

NOTARY LICENSE AGENT & NUMBER	SUBSCRIBED TO AND SWORN BEFORE ME THIS	Residing in (County)
<i>Nancy Lee Malanco</i>	1994	

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/VFS OPERATOR NUMBER	DATE
Ann Clark	<i>X Ann Clark</i>	06-01-9	12-12-94

LOT 1, BLOCK 1, PRINDLE PARK ESTATES,
ACCORDING TO THE PLAT THEREOF, RECORDED
IN BOOK "A" OF PLATS, PAGE 131, RECORDS
OF SKAMANIA COUNTY WASHINGTON.

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Unofficial
Copy