



123809

MANUFACTURED HOME
APPLICATION

BOOK 153 PAGE 636

Please check one

- ☒ 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)

FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

Nov 16 11 43 AM '95

O. Lowry
AUDITOR
GARY M. OLSONFILED AT THE REQUEST OF:
NAME

ADDRESS

1 MANUFACTURED HOME

TP/PLATE NUMBER 96130854	YEAR 1996	MAKE FLEETWOOD	WIDTH/LENGTH 40 X 56	VEHICLE IDENTIFICATION NUMBER (VIN) WAFLS31AB613719-BA13
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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 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

03-08-27-3-0-040400

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 X	DATE
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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 EDWARD D. CARR	SIGNATURE/TITLE X Edward D. Carr	BUILDING PERMIT OFFICE PHONE # 425-9484	DATE 11-14-95
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OWNER INFORMATION

COUNTY # 1	INC. UNINC. <input checked="" type="checkbox"/> <input type="checkbox"/>	# REGISTERED OWNERS 2	# LEGAL OWNERS 1
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Provide the Washington Driver's License or I.D. card number (PIC) for each owner. ☒ Indexed, ☒ Indirect, ☒ Filled, ☒ MailedNAME OF FIRST OWNER
STEVE A. BLOVINNAME OF SECOND OWNER
SANDRA K. BLOVINADDRESS OF OWNER
P.O. BOX 840

CITY CARSON	STATE WA	ZIP CODE 98610
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NAME OF FIRST LEGAL OWNER
THE CIT GROUP/SALES FINANCING INCMAILING ADDRESS OF FIRST LEGAL OWNER
P.O. BOX 24610

CITY OKLAHOMA	STATE OK	ZIP CODE 73124
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SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY. *[Signature]*--OR-- if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.
600-630770

More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.

DEALER'S REPORT OF SALE

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

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 AFFIRM, UNDER PENALTY OF PERJURY LAW THAT I AM THE REGISTERED OWNER OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE. (Owner Signature(s) & Title):

[Signature]
X *[Signature]* PUBLICNOTARY OR LICENSING AGENT
X *[Signature]* DE WASHINGTON
X *[Signature]* DARNUMSUBSCRIBED TO AND SWORN BEFORE ME THIS
27 DAY OF OCTOBER 1995

Residing in (County):

CLARK

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/VFS OPERATOR NUMBER 30-01-08	DATE 11-16-95
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✓
Lot 3, RUDHE TRACTS, according to the recorded plat thereof,
recorded in Book A of Plats, Page 141, in the County of Skamania,
State of Washington.

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Unofficial
Copy