

123891

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MANUFACTURED HOME APPLICATION

FILED FOR RECORD BY SKAMANIA CO. TITLE

FILED AT THE REQUEST OF: NAME ADDRESS

Nov 27 3 30 PM '95 P. Lowry AUDITOR GARY M. OLSON

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)

1 MANUFACTURED HOME
TPO/PLATE NUMBER: %96650
YEAR: 1984
MAKE: New? Redman Mach
WIDTH-LENGTH: 28' x 56'
VEHICLE IDENTIFICATION NUMBER (VIN): 11811256

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 [X] AFFIXED [ ] REMOVED
PROPERTY TAX PARCEL NUMBER: 03063200110000

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:
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: Ken Baird
SIGNATURE/TITLE: Ken Baird Bldg. Inspector
BLDG PERMIT OFFICE/PHONE #: (509) 427-9484
DATE: 10/6/95

5 OWNER INFORMATION
COUNTY: INC: UNINC:
REGISTERED OWNERS: 2
LEGAL OWNERS:
Provide the Washington Driver's License or I.D. card number (PIC) for each owner: CUMMINSJW487KK
NAME OF FIRST OWNER: Cummins, John W.
NAME OF SECOND OWNER: Cummins, Elizabeth S.
ADDRESS OF OWNER: 41 Cougar Creek Road
CITY: Skamania STATE: WA ZIP CODE: 98648
NAME OF FIRST LEGAL OWNER: Western United Life Assurance Company
MAILING ADDRESS OF FIRST LEGAL OWNER: 929 W. Sprague
CITY: Spokane STATE: WA ZIP CODE: 99204
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE REMOVAL FROM REAL PROPERTY. X Beth Swanson, Secretary
FILING FEE: APPLICATION: MOBILE HOME FEES: ELIMINATION: USE TAX: SUB-AGENT FEES:
TOTAL FEES & TAX: \$
DEALER'S REPORT OF SALE
I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

6 COUNTY AUDIT/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: Peggy Lowry
SIGNATURE: X P. Lowry
OFFICE/TS OPERATOR NUMBER: 30 01 06
DATE: 11/27/95

Notary Public Seal: John W. Cummins, Notary Public, State of Washington, Commission Expires 12/31/95.
SUBSCRIBED TO AND SWORN BEFORE ME THIS 10th DAY OF NOVEMBER 1995.
Residing in (County):

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92410

EXHIBIT "A"

Ziegler/Cummins

The East 421.5 feet of the North half of the Northeast quarter of the Southeast quarter of Section 32, Township 2 North, Range 6 East of the Willamette Meridian.

EXCEPT that portion thereof lying within and southerly of County Road No. 1010 designated as the Franz Road.

UNOFFICIAL COPY