



126547

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MANUFACTURED HOME APPLICATION

RECORDED & CLOCK SKAMANIA CO. WASH BY SKAMANIA CO. TITLE OCT 25 9 51 AM '96 P. Laury	FILED AT THE REQUEST OF: NAME ADDRESS
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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			
TPOPLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH
	1997	FLEETWOOD	60 x 28
			VEHICLE IDENTIFICATION NUMBER (VIN)
			ORFLT48AB23090-CSI3

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: 03-08-17-40-0206-00

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
		X	

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
Ken Baird	X Ken Baird Bldg Inspector	(509) 427-9484	10/17/96

5. OWNER INFORMATION

COUNTY #	INC UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FEES
	<input checked="" type="checkbox"/> <input type="checkbox"/>	2	1		FLING FEE APPLICATION MOBILE HOME FEES ELIMINATION USE TAX SUB-AGENT FEES

NAME OF FIRST OWNER	ROBERT A. BLAIR
NAME OF SECOND OWNER	TAVINE N. BLAIR
ADDRESS OF OWNER	PO BOX 434
CITY	N. BONNEVILLE WA 98639
NAME OF FIRST LEGAL OWNER	THE CIT GROUP/SALES FINANCING
MAILING ADDRESS OF FIRST LEGAL OWNER	P.O. BOX 24610
CITY	OKLAHOMA CITY OK 73124-0610

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 ATTEST UNDER PENALTY OF PERJURY LAW THAT WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.

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

NOTARY OR LICENSE AGENT & NUMBER

X DEBI J. BARNER DEBI J. BARNER 18<sup>th</sup> DAY OF JULY 1996 Residing in (County) CLARK

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/VS OPERATOR NUMBER	DATE
Angela Moser	X Angela Moser	30-01-08	10-25-96

COUNTY TITLE, as trustee THE CIT GROUP SALES FINANCING, INC., as beneficiary, dated July 16, 1996, recorded July 19, 1996 in Book 158, Page 518, Auditor File No. 125794, Skamania County Mortgage Records, given to secure the payment of \$64,443.00.

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5. THE LAND REFERRED TO IN THIS POLICY IS DESCRIBED AS FOLLOWS:

Lot 6, SHELLY GLEN, according to the recorded plat thereof, recorded in Book B of Plats, Page 80, in the County of Skamania, State of Washington.