126	707	BOOK 160	PAGE_809
- O Department of	ANUFACTURED HOME	RECORDER & CLOCK COTRU	FILED AT THE REQUEST OF:
ICENSING Please check one	APPLICATION	HY SKAMANIA CO, TILLE	NAME
	er og er er er	10 15 9 02 AH 196	ADORESS
TITLE ELIMINATION (Complete al TRANSFER IN LOCATION (Comp	Olele Al I. sections below)	Pawry	
REMOVAL FROM REAL PROPER	RTY (Complete all but section 4, below)	A Section	
MANUFACTURED HOME		CARY	
TPOPLATE NUMBER TO A TO 1 2 1001	11.00.110.110.110	VEHICLE IDENTIFICATIO	ON NUMBER (VIN)
2 LAND	LTWD 66×27	OKF-LP48AK	3171/8CP
Attach a copy of the legal descript Assessor's office or it may be type Manufactured home will be	otion of your fand. It can be obtained ted or printed on an Additional Attack AFFIXED REMON	hment Form (TD-420-732).	-08-20-1-0208-00
3 TITLE COMPANY CERTIFICATION	ON O		
I certify that the legal description	of the land and ownership is true an	d correct per the real property rec	orde
MAME TI	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
Cingling this and lighting with	/	K	!
4 BUILDING PERMIT OFFICE CER	a Licensing Agent within 10 calendar	r days of the date Title Company f	Representative signs.
- CONTRACT CONTRACT OF THE	HILIOMION		
permit has been issued for this pr	me has been affixed to the real prop urpose and the attachment will be in	erty as described, or a building	BLOG PERMIT #
NAME 810	CHATURE/TITLE	Spected upon completion.	
X		OLDO PENMI OFFICEPRIONE	DATE
5 OWNER INFORMATION			FEES
COUNTY I NC UNINC REGISTERED OW	TOTICE DI	ne Washington Driver's License or I.D.	FLINGFEE
NAME OF FIRST OWNER	card numb	ber (PIC) for each owner:	1
JIM SHANK		7	APPLICATION
NAME OF SECOND OWNER		SHANKJB46QB	
CYNTHIA SHANK		SHANKCC418LF	MOBILE HOME FEES
1.0.00 821		OR if the owner is a business,	ELIMINATION B
CARSON	STATE ZIPCOLE	provide the Unified Business	USE TAX INCITAL
NAME OF FIRST LEGAL OWNER	WA 98610	Identifier (UBI), found on the business Registration & Licenses	black
CAFEATTOFF FILL	IANCIAL CORP	Document.	SUB-AGENT FEES
GREENTREE FINI MALENG ADDRESS OF FIRST LEGAL OWNER	ANCIAL CUKP		
P.O. BOX 3290		More than two owners or one lienholder? Please use attachment	TOTAL FEES & TAX
CITY	STATE ZPCODE	form(s) #TD-420-732.	 \$
	WA 98003	DEALER'S REPORT OF SALE	<u> </u>
SIGNATURE OF LEGAL OWNER MOICHTEN	CONSENT FOR ELIVINATION OF TITLE REMOVAL	I certify that this information is corr	ract. The vehicle is clear.
FROM REAL PROPERTY: X	to cen	or encumbrances except as shown.	i.
myone who knowingly makes a false statement of pon conviction may be purished by a fine of up to	lo \$5 000 cod/or40	NO. DATE OF SALE	PURCHASE PRICE
RCW 45.12.210). I DO SOLEMNLY ATTEST UP HAT IWE ARE THE REGISTERED OWNERS OF	RIDED OCHULTY OF BED WALLS	WALFE	\$
ON IS ACCURATE: Owner Signature(s) Title(INSVEHICLE AND THIS INFORMA.	AMO	TAX JURISDICTION TAX RATE
Dames B. Sh	and DEALERS	AUTHORIZED SIGNATURE	1100-
(Inthe)	Than D X	HILL COP	ELAND
i yearan	Munik_	USE TAX EXEM TO A Cert	trides (time) in more on
DTARY OR UCENSE AGENT & NUMBER	CHECKERED TO AND CHECKER	the reservation (had locar portra	Piylen () dailey)
for A explore The	SUBSCRIBED TO AND SWORN BEFO	المراجع المراج	
COUNTY AUDITORVAGENT LICEN	NSING OFFICE APPROVAL: (Not foruse b	370776 7030	ic § ≥ §
ceruit marma above application a	and betalamos good over 10 21SANOF	y Sub-Agents)	17.08
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Penny John Lowry	1. Q. Y.	OFFICENTS OPERATOR NUMBER	1 / / 1
420-7294MANUF HOME APPL (F) 12/94)M Page 1 of 2	IX Veggy Xvwry	30 01 06	11/15/96
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STATE OF WASHINGTO	INIMINU	FACTURED HO	BECOODED & COOK		FILED AT THE REQUEST OF: NAME
Please check one					ADDRESS
TRANSFER IN LOC	N (Complete all but s CATION (Complete Al REAL PROPERTY (C	ection 3, below) LL sections below) complete all but section 4, belo	ow)	. 4	\bigcirc
MANUFACTURED					
	1994 FLTU	WIOTHLENGTH (ICX)	17	ORFLP48ABI	
	anal danadation o				
Assessor's office or it Manufactured home	l may be typed or	printed on an Additional	btained from your Count 1 Attachment Form (TD-4 REMOVED	TO CO TO CO.	11 TAX PARCEL MAISER 18-20-1-0208 C
3 TITLE COMPANY	CERTIFICATION				
I certify that the legal	description of the	land and ownership is t	true and correct per the r	eal property recor	ds.
NAME		MPANY/PHONE NUMBER	SIGNATURE		DATE
Finalize this appli	cation with a Lice	nsing Agent within 10 ca	alendar days of the date	Title Company Re	presentative signs.
4 BUILDING PERMI	T OFFICE CERTIFICA	ATION			
permit has been issu	ed for this purpos	e and the attachment wi	al property as described ill be inspected upon con	npletion.	BLDG PERMIT #
Ken BA	SIGNATURE X	en Bard	Olyphyse Lo (509)	427-9484	10/25/96
COUNTY I NC UNINC	REGISTERED OWNERS		rovide the Washington Drive and number (PIC) for each ow		FEES FILING FEE
NAME OF FIRST OWNER B SHA NAME OF SECOND OWNER	NK		SHANKJB4	16QB	APPLICATION
CYNTHIA ADDRESS OF OWNER	SHANK	<u> </u>	SHANKCC	418LF	MOBILE HOME FEES
E CITY	- 1	STATE ZIP CODE	provide the Unifi		USETAX
CARSON NAME OF FIRST LEGAL		WA 98610	Document.	ration & Licenses	SUB-AGENT FEES
MAILING ADDRESS OF	IRST LEGAL OWNER	ICIAL CORP	More than two ow	rners or one	TOTAL FEES & TAX
P.O. BOX	3290	STATE ZIP CODE		se use attachment	\$ I
PEDERAL	WAY	WA 9800.	DEALER'S REF	ORT OF SALE	<u> </u>
SIGNATURÉ OF LEGAL FROM REAL PROPERTY		ENT FOR ELIMINATION OF TITLE/RE	i cointy that unit	s information is corre	ect. The vehicle is clear
upon conviction may be punish	ned by a fine of up to \$5,0	ateñal fact is guilty of a felony, and 000 and/or 10 years imprisonment			PURCHASE PRICE
THAT WE ARE THE REGIST TION IS ACCURATE: Owner	ERED OWNERS OF THE	R PENALTY OF PERJURY LAW SVEHICLE AND THIS INFORMA-	DEALER NAME		TAX JURISDICTION/TAX RATE
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X V (ynt)	ua C. S.	rwn K	USE TAX the reservati	on (atam) (darper)	had value I mumber on Marky (2000)
NOTARY OR LICENSE ACENT & HE X - COLUMN ALL DOTS	bol The	25 DAY OF (ctober 19 96	TANK THE THE	c & ≥
I certify that the above	e application appe	GOFFICE APPROVAL: (No Bars to have been comp	t for use by Sub-Agents) leted correctly, and the a	applicant has sufficient	gett gocumentation to
proceed with the reco	orung of this form	SIGNATURE	OFFICE/	VFS OPERATOR NUMBER	DATE
TD-420-729 MANUE HOME APPLIES	WAR ST	X		Tiber	L

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451.

Lot 7, NEWMAN SUBDIVISION, according to the recorded Plat thereof, recorded in Book B of Plats, Page 67, in the County of Skamania, State of Washington.

EXCEPT that portion Conveyed to Skamania County by instrument recorded in Book 152, Page 844.

BOOK /60 PAGE 8//

NOTE: investigation should be made to determine if there are any service, installation, maintenance or construction charges for sewer, water, telephone, gas, electricity or garbage and refuse collections, or any covenants, conditions and restrictions under which estate, lien or interest in property has been, or may be, cut off, subordinated or otherwise impaired.