| 43721CF  |                           | 0.0                         |                                 |  | n in in the second and the second an |  |
|--|---------------------------|-----------------------------|---------------------------------|--|--|--|
| STATE OF WASHING   | ton ·                     | 26778                       |                                 | BOOK 160   | PAGE 999   |  |
|  |                           | MANUFAC                     | TURED HOME                      | Mechaela trock AF 308[                                       | ) FILED AT THE PEOUEST OF:   |  |
| APPLICATION  |                           |                             | SKAME OF BUNAS                  | NAME   |  |  |
| Please check one   |                           |                             |                                 | BY CLARK COUNTY 1  | LITLE  |  |
| THILE ELIMINATION (Complete all but section 3, below)  |                           |                             |                                 | u 25 J DU IO   | C ADDRESS  |  |
| T I mount en la fr   | JUBIKANI                  | Complete All acuses         | Key 25 4 11 PH 'S               | 16   |  |  |
| MORALFRON  | I REAL PR                 | OPERTY (Complete            | GXawry                          |  |  |  |
| 1 MANUFACTURE  | HOME                      |                             |                                 | 1:000  |  |  |
| +070869  | YEAR                      | MAKE                        | WIDTHLENGTH                     | - GARY H OLSON   |  |  |
|  | 1070864 95 Silvemob 40166 |                             |                                 |  | YENCLE IDENTIFICATION HUMBER (YIN)   |  |
| Attach a copy of the   | legal de                  | scription of your t         |                                 |  | OGSA   |  |
| Assessor's office or   | it may be                 | Styped or printed           | and. It can be obtained         | from your County<br>ment Form (TD-420-732).                  | PROPERTY TAX PARCEL NUMBER   |  |
|  |                           | 1217"                       | FIXED   REMO\                   | iment Form (TD-420-732).<br>/FD                              | 01-05-06-4-0-0111-06   |  |
| 3 TITLE COMPANY  | CERTIFIC                  | ATION                       |                                 |  |  |  |
| I certify that the legal   | descript                  | lion of the land ar         | d ownership is true and         | d correct per the real proper                                |  |  |
| NAME.  |                           | TITLE COMPANY PHO           | NE NUMBER S                     | IGNATURE   | TY records.  |  |
| Finalize this anni   | iontin                    |                             |                                 | 6. Th  |  |  |
| 4 BUILDING PERMI   | Cation W                  | orn a Licensing A           | gent within 10 calendar         | days of the date Title Comp                                  | any Representative signs   |  |
| I certify that the many  | factures                  | bome bes be                 |                                 |  | riepiusemanve signs.   |  |
| permit has been issu-  | ed for thi                | heed seu airini             | allixed to the real prop        | erty as described, or a build<br>spected upon completion.    | ING BLDG PERMY   |  |
| NAME   | - ,                       | SIGNATURETITLE              | a attachment will be ins        | pected upon completion                                       |  |  |
| Ben BAI  |                           | X Zen                       | Bail Bes                        | BLDG PERMIT OFFICE PHON                                      |  |  |
| 5 OWNER INFORMA  |                           |                             | 13.47                           | 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                       | 84 11/15/96  |  |
|  | # REGISTERI               | ED OWNERS # LEGAL           | OWNERS Provide the              | Washington Driver's License o                                | r I.D. FLENGEE   |  |
| NAME OF FIRST OWNER  |                           |                             | card numb                       | er (PIC) for each owner:                                     | LENGIEE  |  |
| STARK<br>NAME OF SECOND OWNE   | BILL                      | 5                           | 2 2                             |  | APPLICATION  |  |
|  | ,                         |                             |                                 | STARKBF G1189  |  |  |
| S STARK ADDRESS OF OWNER   | ARE.                      | N M.                        |                                 | 15 APULL STOR  | MOBILEHOMEFEES   |  |
| 11 CEDAR   | <b></b>                   |                             |                                 | LSTARKKM 334 QA  | EARCHITICAL TO A STATE OF  |  |
| D CITY   | FOR                       | K Lane                      | ZP CODE                         | OR- if the owner is a busine<br>provide the Unified Business | ess, 'sdexed, Dir 4  |  |
| WASHOUGA   | <b>/</b> .                | WA                          | 98671                           | Mentifier (UBI) found on the                                 | USE TAIL INCHOCL   |  |
| NAME OF FIRST LEGAL O  | WNER*                     |                             |                                 | business Registration & Licens                               | es   |  |
| WASIFING   | m /                       | nurual Si                   | AVINGS BUNK.                    | Document   | SUB-AGENT FREE . (1)   |  |
|  | ISTLEGAL O                | WNER CL                     | Ja Clark.                       | 048-006-8049<br>More than two owners or one                  |  |  |
| cny /  | riace                     | STATE                       | V                               | Tenholder? Please use attachme                               | TOTAL FEES & TAX   |  |
| De Vanc.   | WI                        | //                          | 96660                           | form(s) #TD-420-732.   | <b>S</b>   |  |
| SIGNATURE OF LEGAL OF  | MER MOICA                 | HES CONSENTEDR ELIM         | NATION OF TITLE REMOVAL         | DEALER'S REPORT OF SAL                                       |  |  |
| THOM NEAT PROPERTY.  | Χ :                       |                             | / O )                           | I certify that this information i                            | is correct. The vehicle is clear   |  |
| Anyone who knowingly makes a upon conviction may be conjected  | alse statem               | ent of a material fact is g | uity of a felony AND DIM PLRAIC | of encumbrances except as s                                  | nown.  |  |
| (RCW 46.12.276), 1 60 SOLEN  | NLY ATTES                 | ST HNDED DOWN TO            | rears imprison me               | 7  | PURCHASE PRICE   |  |
| THAT I'VE ARE THE REGISTED THAT I'VE ARE THE REGISTED TO THE PROPERTY OF THE REGISTED TO THE R | FOOWNER                   | IN OUR THIS VEHICLE AN      | DITHIS TORMAN TUCALERINA        | 4 4  | TAX JURISDICTION/TAX RATE  |  |
| x / /// 5/16/  |                           | e(e).                       | S I TOTALLY                     | 707  |  |  |
|  |                           | 9                           | TUBUO                           | UTHORIZECESIGNATURE  |  |  |
| v  | A                         | tark                        | 3132001                         | 74   |  |  |
| NOTATION CENSE APPLIES NAMES  NOTATION OF LICENSE A |                           |                             |                                 |  |  |  |
| X A I A CALL SUBSKHARED TO AND |                           |                             |                                 |  |  |  |
| 6 COUNTY AUDITOR/AGENT I CENSULO OFFICE AND 197  |                           |                             |                                 |  |  |  |
| I certify that the above a   | pplicatio                 | n appears to how            | PHOVAL: (Not for use by         | Sub-Agents) ectly, and the applicant has                     |  |  |
| proceed with the record  | ing of thi                | s form.                     | e neen combleted com            | ectly, and the applicant has                                 | sufficient documentation to  |  |
| Anal Mi  |                           | SIGNATURE                   |                                 | OFFICENTS OPERATOR NUM                                       |  |  |
| magic 116  | <u>00</u>                 | lxcdr                       | all Mese                        | 1 ~  | 1 1  |  |
| TD-420-729 MAYUF HOME APPL (8/29   | IM Page 1 o               | 15                          | ()                              | 80-10-01   | 11-25-96   |  |

5 96

That portion of the North half of the Southeast quarter of Section 6, Township 1 North, Range 5 East of the Willamette Meridian in the County of Skamania and State of Washington lying East of the East line of Lot 12 of the Silver Star Acres Subdivision.

EXCEPT the East half thereof as conveyed to Charles H. Bettis, et ux, by instrument recorded December 7, 1989 in Book 117, Page 8, Skamania County Deed Records.

BOOK 160 PAGE 1000

as l