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## RETURN ADDRESS:

Transnation Title Insurance CO.  
501 S.E. Columbia Shores Blvd.  
Vancouver, WA 98661

177919TW

FILED FOR RECORD  
SKANANIA CO. WASH  
BY *Transnation*

JAN 16 4 37 PM '97

*G. Larry*  
AUDITOR  
GARY M. OLSON

Please Print or Type Information.

Document Title(s) or transactions contained therein:

1. Title Elimination
- 2.
- 3.
- 4.

GRANTOR(S) (Last name, first, then first name and initials)

1. Bowman, Mark E.
2. Bowman, Madeleine F.
- 3.
- 4.

☐ Additional Names on page \_\_\_\_\_ of document.

GRANTEE(S) (Last name, first, then first name and initials)

1. The Public
- 2.
- 3.
- 4.

☐ Additional Names on page \_\_\_\_\_ of document.

LEGAL DESCRIPTION (Abbreviated: I.E., Lot, Block, Plat or Section, Township, Range, Quarter/Quarter)

Lot 3, Short Plat recorded in Book 3, at page 272.

☐ Additional Names on page \_\_\_\_\_ of document.

REFERENCE NUMBER(S) Of Documents assigned or released:

☐ Additional Names on page \_\_\_\_\_ of document.

ASSESSOR'S PROPERTY TAX PARCEL/ACCOUNT NUMBER

2-5-31-3-103

☐ Property Tax Parcel ID is not yet assigned.☐ Additional Names on page \_\_\_\_\_ of document.

The Auditor/Recorder will rely on the information provided on the form. The Staff will not read  
the document to verify the accuracy or completeness of the indexing information.

Indexed ☒  
Filed ☒  
Noted ☒  
Voted ☒



# MANUFACTURED HOME APPLICATION

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RECORDER'S CLOCK

FILED AT THE REQUEST OF:

NAME

ADDRESS

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	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	97	Waverly	60 X 40	WAFLT31A14679 WC13

## 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

## 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	1/3/98

## 5 OWNER INFORMATION

COUNTY	NO. UNITS	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or ID card number (PIC) for each owner:	FEES
NO	1	2	1		
NAME OF FIRST OWNER					ODL #
Mark E. Bowman					4486-755
NAME OF SECOND OWNER					ODL #
Madeleine F. Bowman					2445561
ADDRESS OF OWNER					
212 Eastwood Lane					
CITY	STATE	ZIP CODE			
Washougal	WA	98671			
NAME OF FIRST LEGAL OWNER*					
Washington Mutual Bank					
MAILING ADDRESS OF FIRST LEGAL OWNER					
1201 Main Street					
CITY	STATE	ZIP CODE			
Vancouver	WA	98660			
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE REMOVAL FROM REAL PROPERTY.					
X Sherick Hungellow					

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 I AM ONE OF THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS TRUE.

Owner Signature(s) & Title(s):  
X Mark E. Bowman  
X Madeleine F. Bowman

Subscribed to and sworn before me this 25th day of Sept. 1996  
Residing in (County) Clark

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 Maser  
SIGNATURE: X Angela Maser  
OFFICE/VES OPERATOR NUMBER: 30-01-08  
DATE: 1-3-98

WA DLR NO	DATE OF SALE	PURCHASE PRICE
	9-25-96	\$ 65,145.00
DEALER NAME	TAX JURISDICTION/TAX RATE	
	.070	
DEALER'S AUTHORIZED SIGNATURE		
X		

USE TAX EXEMPT Sale to a Certified Tribal member on the reservation. (attach notarized statement of delivery)



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Lot 3, of the amended SHORT PLAT of the County line tracts,  
recorded in Book "3" of Plats, Page 272, records of Skamania  
County, Washington.