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FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

JUL 23 9 41 AM '97
CHLOSER
AUDITOR
GARY M. OLSON

AFTER RECORDING MAIL TO:

Name Columbia T. & C.
Address P.O. Box 735
City / State White Salmon, WA 98672

Document Title(s): (or transactions contained therein)

1. Manufactured Home Application
- 2.
- 3.
- 4.

 **First American Title Insurance Company**

Reference Number(s) of Documents assigned or released:

☐ Additional numbers on page _____ of document

Grantor(s): (Last name first, then first name and initials)

1. Walker CIAA
- 2.
- 3.
- 4.
5. ☐ Additional names on page _____ of document

Grantee(s): (Last name first, then first name and initials)

1. STATE OF WA, DEPT. OF LICENSING
- 2.
- 3.
- 4.
5. ☐ Additional names on page _____ of document

Abbreviated Legal Description as follows: (i.e. lot/block/plat or section/township/range/quarter/quarter)

SW 1/4 of Sec 26, T4N, R9E

☐ Complete legal description is on page 3 of document

Assessor's Property Tax Parcel / Account Number(s):

04-09-26-0-0-0307

Registered ☒
Indexed, Dir ☒
Indirect ☒
Filmed ☒
Mailed ☒

NOTE: The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.



MANUFACTURED HOME APPLICATION

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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)

RECORDER'S CLOCK

FILED AT THE REQUEST OF:
NAME

ADDRESS

1 MANUFACTURED HOME

TPOPLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	97	FLEETWOOD	40X60	ORFLT48A8223421LP13

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

24-01-26-0-0007

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.

BUILD PERMIT #

310

NAME	SIGNATURE/TITLE	BUILD PERMIT OFFICE/PHONE #	DATE
Ken Baird	X Ken Baird, Building Inspector	(509) 427-9484	7/22/97

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:
	<input type="checkbox"/>	<input type="checkbox"/>			

FEES

FILING FEE

APPLICATION

MOBILE HOME FEES

ELIMINATION

USE TAX

SUB-AGENT FEES

TOTAL FEES & TAX

\$

NAME OF FIRST OWNER

CLAY A. WALKER

NAME OF SECOND OWNER

VEDA M. WALKER

ADDRESS OF OWNER

PO Box 173

CITY Underwood

STATE

WA

ZIP CODE

98651

NAME OF FIRST LEGAL OWNER

THE CIT GROUP SALES/FINANCING

MAILING ADDRESS OF FIRST LEGAL OWNER

PO Box 24610

CITY Oklahoma City

STATE

OK

ZIP CODE

73124

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE REMOVAL

FROM REAL PROPERTY

5659214

—OR— if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.

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 I AM THE REGISTERED OWNER OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE. Owner Signature(s) & Title(s):

X Clay Walker
X Veda Walker

NOTARY OR LICENSE AGENT & NUMBER

X [Signature]

WA DLR NO.

DATE OF SALE

PURCHASE PRICE

\$

DEALER NAME

TAX JURISDICTION/TAX RATE

DEALER'S AUTHORIZED SIGNATURE

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

Residing in (County)

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/VES OPERATOR NUMBER	DATE
Angela Moser	X Angela Moser	30-01-08	7-23-97

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the following described real estate, situated in the County of SKAMANIA, State of Washington:

A TRACT OF LAND IN THE NORTH HALF OF THE NORTH HALF OF THE SOUTHWEST QUARTER OF SECTION 26, TOWNSHIP 4 NORTH, RANGE 9 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

LOT 2 OF THE SHORT PLAT, RECORDED IN BOOK 3 OF SHORT PLATS, PAGE 275 SKAMANIA COUNTY RECORDS

SUBJECT TO:
EASEMENT FOR SEPTIC AND ACCESS AS SHOWN ON THE RECORDED SHORT PLAT. DECLARATION OF COVENANTS RECORDED SEPTEMBER 27, 1995 IN BOOK 152, PAGE 576.

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