

133013

BOOK 181 PAGE 952

FILED
SMITH
BY CLARK COUNTY TITLE

RETURN ADDRESS

Clark County Title Company
217 SE 136th Ave., Suite 104
Vancouver, WA 98684
Attn: Betty Egger (360) 882-9088

OCT 5 10 42 AM '98

Moser
GARY H. OLSON

#55244 BE

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION	
PLEASE CHECK ONE			
☒ TITLE ELIMINATION		☐ TRANSFER IN LOCATION	
☐ REMOVAL FROM REAL PROPERTY			
1 MANUFACTURED HOME			
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH X WIDTH X FEET
	98	FUQUA	48 X 38
VEHICLE IDENTIFICATION NUMBER (VIN)		16205	
2 LAND			
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED			
PROPERTY TAX PARCEL NUMBER 04-01-26-2-1913			
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
13		WINDRIVER LOTS II	
A legal description can be obtained from the local County Assessor's Office. If there is not enough room here, use the Application Attachment form, TD-420-732, available at your local County Auditor's Office.			
Lot 13, Wind River Lots II according to the recorded plat thereof, recorded in Book 3 of Plats, page 42 in the County of Skamania, State of Washington.			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)			
COUNTY	INCORPORATED	UNINCORPORATED	REGISTERED OWNERS
SKAMANIA		X	2
NAME OF FIRST REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER	
Stephen V. McKee & Jennifer L. McKee		mckeesv282 mckeejl4375	
ADDRESS OF FIRST REGISTERED OWNER		CITY	STATE
351 TAMI CREEK RD		CARSON	WA
NAME OF FIRST LEGAL OWNER		CITY	STATE
Crossland Mortgage Corp		Portland	OR
ADDRESS OF FIRST LEGAL OWNER		CITY	STATE
9115 SW Oleson Rd., #106		Portland	OR
GRANTEE(S)			
NAME OF FIRST GRANTEE			
Public			
DOL CUSTOMER ACCOUNT NUMBER			
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, imprisonment, or both. (RCW 4B.12.210)			
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: X			
SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE			
SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE			
NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
State of Washington		Signed or attested	
County of Clark		before me on 6-24-98	
by Stephen V. McKee & Jennifer L. McKee		Signature Betty Ann Egger	
Printed Name of Applicant		Dealer No. OR	
Title NOTARY		AND: County Office No. OR	
DEALERSHIP Position Agent/NOTARY		Notary Expiration Date 7-19-2001	
DEALER'S REPORT OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown.			
DEALER NAME	WA DEALER NUMBER	DATE OF SALE	
Sundance Home Sales, Inc.	4115	7-1-98	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
6000	7.6	Michelle Wolcott	
☐ USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).			
4 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 (TYPED OR PRINTED)		COUNTY OFFICE/VES OPERATOR NUMBER	
Angela Moser		30-01-08	
SIGNATURE		DATE	
<i>Angela Moser</i>		10-5-98	

TD-420-729 MANUF HOME APPL (5/12/96) OR Page 1 of 2

INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE SIDE

5 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 / POSITION	DATE
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.	
6 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	BUILDING PERMIT OFFICER/PHONE #
SIGNATURE / POSITION	(509) 427-9484
<i>Marlon Morat</i>	Building Inspector 9-30-98

INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW,
DEPENDENT UPON THE TRANSACTION YOU WISH TO PROCESS.

- A. Manufactured Home Title Elimination Application** (complete boxes 1, 2, 3, 4 and 6) Use to eliminate a title for a manufactured home which is to become real property.
- B. Manufactured Home Transfer in Location Application** (complete all boxes). Use only when a manufactured home (whose title has been eliminated) is being moved to land with a different legal description AND will become part of the real property to which it will be moved and affixed. If the transfer in location is between two different counties, prepare this form in duplicate and have each recorded in its respective county.
- C. Manufactured Home Removal From Real Property Application** (complete boxes 1, 2, 3, 4 and 5). Use when titling a manufactured home whose title has been previously eliminated. Once properly completed and recorded, this application becomes a supporting document taking with others required to apply for a Certificate of Title for the manufactured home.
- IMPORTANT: SIGNATURES OF THE OWNERS ON THE MANUFACTURED HOME APPLICATION INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 RCW AND INDICATE INTENT TO PERFECT INTEREST IN THE MANUFACTURED HOME AS REAL PROPERTY WITH THE LAND HE/SHE/IT/ THEY OWN AND TO WHICH IT IS/ WILL BE AFFIXED. IF THE MANUFACTURED HOME IS BEING REMOVED FROM REAL PROPERTY, SIGNATURES OF THE OWNERS PER THE REAL PROPERTY RECORDS INDICATE CONSENT TO THE REMOVAL. THE FORM MAY THEN BE USED FOR MAKING APPLICATION FOR TITLE WITH THE DEPARTMENT OF LICENSING AS PROVIDED BY CHAPTER 46.12 RCW.**

Note: Owners of the manufactured home must own the land when the application is for a Manufactured Home Title Elimination or a Manufactured Home Transfer in Location, as provided by Chapter 65.20 RCW.

SECTION 1 Enter the description of the manufactured home.

SECTION 2 Place an "X" in the appropriate box and enter the property tax parcel number, lot, block, plat number and section/township/range, when applicable. Write a legal description in the space provided. If there is not enough room, use the Title Application Attachment (TD0420-732). When processing a "Transfer in Location Application," both boxes should be checked. The application must then be accompanied by two separate land descriptions.

SECTION 3 This area must be signed by all registered owners of the manufactured home when processing a title elimination. If the manufactured home has been sold and is being removed from the real property, the owners per the real property records must complete this portion to obtain a Certificate of Title. Signatures of the owners must be notarized or certified by the selling dealer or a vehicle licensing agent. Fees will include a filing and application fee plus sales or use tax due. Additional fees may include: a title elimination fee and a Mobile Home Affairs Fee. Subagents will charge an additional service fee. (Fees are subject to change without notice.)

SECTION 4 Take the properly completed Manufactured Home Application and all necessary supporting documents to the County Auditor/Licensing Agent Office for approval. Supporting documents may include but are not limited to: proof of ownership or a Manufacturer's Statement of Origin (MSO), proof of taxes paid, and applicable release(s) of interest. Subagents may not complete the approval portion of this form.

SECTION 5 The "Title Company Certification" box must be completed when processing a "Transfer in Location" or a "Removal From Real Property" application. **Important:** The final recorded application form must be submitted to a vehicle licensing agent within 10 days of the title company's certification.

SECTION 6 When processing an "Elimination" or "Transfer in Location" application, a city or county office (depending upon the location of the manufactured home) must certify that the home is affixed to the land or, issue a building permit to affix the manufactured home to the land, inspecting the completed attachment. The issuing office must sign the application, adding the permit number if the inspection has not yet occurred.

IMPORTANT: Once the application has been approved by the County Auditor/Licensing Agent Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.

APPLICANTS: Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees.

The Department of Licensing has a policy of providing equal access to its services.
If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.

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RETURN ADDRESS

Clark County Title Company
- 217 SE 136th Ave., Suite 104
- Vancouver, WA 98684
- Attn: Betty Egger (360) 882-9088

STATE OF WASHINGTON Licensing		MANUFACTURED HOME APPLICATION	
☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY PLEASE CHECK ONE			
1 MANUFACTURED HOME TPO PLATE NUMBER YEAR MAKE MONTH/THIRD USED VEHICLE IDENTIFICATION NUMBER (VIN) 1998 FORD 40 X 48 16205			
2 LAND MANUFACTURED HOME WILL BE ☒ AFFIRMED ☐ REMOVED ADDITIONAL LEGAL DESCRIPTION ON PAGE 1 PROPERTY TAX PARCEL NUMBER 040720-2-191-5 SECTION/TOWNSHIP/RANGE 10/13 BLOCK PLAT NAME Wild River Lots II		TITLE FEES FILING FEE APPLICATION MOBILE HOME FEE ELIMINATION FEE USE TAX SUB AGENT FEES TOTAL FEES & TAX	
A legal description can be obtained from the local County Assessor's Office. If there is not enough room here, use the Application Attachment form, TD-420-732, available at your local County Auditor's Office. <i>Lot 13, Wind River lots II according to the recorded plat thereof, accoided in Book B of plat, page 42, in the County of Skamania, State of Washington.</i>			
3 GRANTOR(S) REGISTERED LEGAL OWNER(S) COUNTY INCORPORATED UNINCORPORATED # REGISTERED OWNERS # LEGAL OWNERS Skamania 2 1 NAME OF FIRST REGISTERED OWNER Stephen V. McKee DOB CUSTOMER ACCOUNT NUMBER 040720-2-191-5 ADDRESS OF FIRST REGISTERED OWNER 351 Kent Creek Rd Carson WA 98610 NAME OF FIRST LEGAL OWNER Crossland Mortgage Corp DOB CUSTOMER ACCOUNT NUMBER ADDRESS OF FIRST LEGAL OWNER 9115 SW Oreson Rd, #106 CITY Portland STATE OR ZIP CODE 97223 GRANTEE(S) NAME OF FIRST GRANTEE		ADDITIONAL NAMES ON PAGE DOB CUSTOMER ACCOUNT NUMBER	
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, imprisonment, or both. (RCW 46.12.210) SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: X <i>Stephen V. McKee</i> SIGNATURE OF FIRST LEGAL OWNER AND TITLE, IF APPLICABLE SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE NOTARY SEAL OR STAMP State of Washington County of by _____ Printed Name of Applicant Title _____ DEALERSHIP Position/Agent/NOTARY Dealer No. OR AND: County/Office No. OR Notary Expiration Date Signature Signed or attested before me on			
DEALER'S REPORT OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown. DEALER NAME PURCHASE PRICE TAX & PROPORTIONATE RATE DEALER'S AUTHORIZED SIGNATURE WA DEALER NUMBER DATE OF SALE ☐ USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery) 4 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 (TYPED OR PRINTED) SIGNATURE COUNTY OFFICE/AGENT OPERATOR NUMBER DATE			