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BOOK 183 PAGE 35

FILED
NOV 6 10 25 AM '98
CLERK OF SUPERIOR COURT
SPOKANE, IDAHO

AFTER RECORDING MAIL TO:

Name _____
Address _____
City/State _____

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

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

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. Morat, Marlon R.
2. Morat, Carol A.
- 3.
- 4.

☐ Additional names on page 1 of document

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

1. State of Washington
2. Department of Licensing
- 3.
- 4.
5. ☐ Additional names on page 1 of document

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

Lot 11, Block 1, EVERGREEN ACRES, according to the recorded Plat thereof, recorded in Book A of Plats, Page 142, in the County of Skamania and State of Washington.

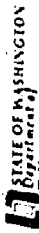
☐ Complete legal description is on page 2 of document

Assessor's Property Tax Parcel / Account Number(s): 03-08-21-2-0-3900-00

 **First American Title Insurance Company**

(this space for title company use only)

NOTE: The auditor/taxpayer 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.



STATE OF WASHINGTON
Department of
Licensing

MANUFACTURED HOME APPLICATION

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)

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RECORDER'S CLOCK	FILED AT THE REQUEST OF: NAME
ADDRESS	

1 MANUFACTURED HOME	
TITLE NUMBER	YEAR
763471	71
MAKE	WIDTH/LENGTH
Brook	52/24
VEHICLE IDENTIFICATION NUMBER (VIN)	
2299	
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). **PROPERTY TAX PARCEL NUMBER** 05 05 21-2 0-3400-0

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	

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
Ken Baird	X Ken Baird, Sup. (509) 427-9784
DATE	BUILDING PERMIT OFFICE/PHONE #
12/17/96	

5 OWNER INFORMATION			
COUNTY #	INC. USE #	REGISTERED OWNERS	# LEGAL OWNERS
	☒	2	1
NAME OF FIRST OWNER			
MARLON R. MORAT			
NAME OF SECOND OWNER			
CAROL A. MORAT			
ADDRESS OF OWNER			
161 OLD STATE ROAD			
CITY	STATE	ZIP CODE	
Carlson	WA	98610	

NAME OF FIRST LEGAL OWNER		
MARLON R. MORAT		
NAME OF SECOND OWNER		
CAROL A. MORAT		
ADDRESS OF OWNER		
161 OLD STATE ROAD		
CITY	STATE	ZIP CODE
Carlson	WA	98610
NAME OF FIRST LEGAL OWNER		
RIVERVIEW SAVINGS		
MAILING ADDRESS OF FIRST LEGAL OWNER		
P.O. BOX 1068		
CITY	STATE	ZIP CODE
CANAS	WA	98607

SIGNATURE OF LEGAL OWNER IN WATERS CONSENT FOR ELIMINATION OF TITLE REMOVAL	
FROM REAL PROPERTY: <i>Ken Baird, Supervisor</i>	
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 WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.	
X <i>Marlon Morat</i>	
X <i>Carol Morat</i>	
X <i>Ken Baird</i>	

DEALER'S REPORT OF SALE	
I certify that this information is correct. The vehicle is clear of encumbrances except as shown.	
DATE OF SALE	PURCHASE PRICE
	\$
DEALER NAME	TAX JURISDICTION/TAX RATE
DEALER'S AUTHORIZED SIGNATURE	
X	
USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)	
Residing in County	

NOTARY OR LICENSE AGENT	
SUBSCRIBED TO AND SWORN BEFORE ME THIS	
DAY OF JANUARY 1996	
X DEBI J. Ferguson	
6 COUNTY AUTHORITY CERTIFICATION	
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 deed.	
NAME	STATE
Angela Moser	WA
SIGNATURE	DATE
<i>Angela Moser</i>	30-01-08

OFFICE USES	
OFFICE USES OPERATOR NUMBER	DATE
	11-5-98

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Lot 11, Block 1, Evergreen Acres, according to the recorded Plat thereof, recorded in Book A of Plats, Page 142, in the County of Skamania and State of Washington.

TOGETHER WITH MOBILE HOME VIN # 2299 1971 Brookwood

