

133777

184 845

Fidelity National Title Co

RETURN ADDRESS

TIMOTHY R. PESCH

LEONARD PESCH

1451 ALDER ROAD

WASHOUGAL, WA 98671

Dec 22 2 14 PM '98

A Moser

SAVING & LENDING

 MANUFACTURED HOME APPLICATION PLEASE CHECK ONE		☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME VIN PLATE NUMBER: 6117435 YEAR: 1996 MAKE: HARLT LENGTH: 28' X 60' VEHICLE IDENTIFICATION NUMBER (VIN): H0212130		2 LAND ADDITIONAL LEGAL DESCRIPTION ON PAGE 3: 02-03-19-0-0-1800-00 LOT: BLOCK: PLAT: 19730/215	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) COUNTY: SKAMANIA INCORPORATED: X NAME OF FIRST REGISTERED OWNER: TIMOTHY R. PESCH ADDRESS OF FIRST REGISTERED OWNER: 1451 ALDER ROAD CITY: WASHOUGAL STATE: WASHINGTON ZIP CODE: 98671 ADDRESS OF FIRST LEGAL OWNER: P.O. BOX 24610 CITY: OKLAHOMA STATE: OKLAHOMA ZIP CODE: 73124 NAME OF FIRST GRANTEE:		4 ADDITIONAL NAMES ON PAGE 4 REGISTERED OWNERS: 2 LEGAL OWNERS: 1 DOL CUSTOMER ACCOUNT NUMBER:	
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. SEE ATTACHED PAGE 3		TITLE FEES PLUMBING FEE: APPLICATION: MOBILE HOME FEE: ELIMINATION FEE: USE TAX: SUB-AGENT FEES: TOTAL FEES & TAX:	
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 SEE ORIGINAL TITLE SIGNATURE OF FIRST LEGAL OWNER AND TITLE IF APPLICABLE: [Signature] NOTARY SEAL OR STAMP: [Notary Seal: JAMES R. COPELAND JR., NOTARY PUBLIC, STATE OF WASHINGTON] NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE: [Signature] State of Washington County of Skamania Signed or attested before me on 12-11-98 Printed Name of Applicant: Notary Dealer No. OR AND: County Office No. OR 9-17-98 Dealership Personnel / Notary:			
DEALER'S REQUIRED FOR SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown. DEALER NAME: PURCHASE PRICE: TAX JURISDICTION/TAX RATE: DEALER'S AUTHORIZED SIGNATURE: WA DEALER NUMBER: DATE OF SALE:			
☐ USE TAX EXEMPT Sale to a Certified Title member on the reservation (attach notarized statement of delivery) 5 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): Angela Moser SIGNATURE: [Signature] COUNTY OFFICE/AGENT OPERATOR NUMBER: 306137 DATE: 12-22-98			

TD-420-732 MANUFACTURED HOME APPLICATION Page 1 of 2

INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE SIDE

184 11-19-98 846

5 TITLE COMPANY CERTIFICATION	
I certify that the legal description of the land and ownership is true and correct as the real property records have.	
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	LOG PERMIT OFFICE PHONE #
Harlon Morat	509-427-9484
SIGNATURE / POSITION	DATE
<i>Harlon Morat</i>	11-19-98
Building Inspector	

INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW.
DEPENDING 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 site 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 site has been previously eliminated. Once properly completed and recorded, this application becomes a supporting document along 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/S/IT/HEY OWN AND TO WHICH IT IS/ILL 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/ownership/acreage, 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 titling 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 property 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) 902-3500 or TDD (360) 664-8885.

BOOK 184 PAGE 847

RETURN ADDRESS

TIMOTHY R. PESCH

LEONARD PESCH

1451 ALDER ROAD

WASHOUGAL, WA 98671

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION	
☒ TITLE ELIMINATION		☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
PLEASE CHECK ONE			
☐ MANUFACTURED HOME			
PROPERTY NUMBER	YEAR	LAND	VEHICLE IDENTIFICATION NUMBER (VIN)
6117435	1996	28 X 60	H0212150
☐ LAND			
MANUFACTURED HOME WILL BE		ADDITIONAL LEGAL DESCRIPTION ON PAGE 3	
☒ AFFIRMED ☐ REMOVED		02-05-19-0-0-1600-00	
LOT	BLOCK	PLAT NAME	REGION/SPONSOR/CHANGE
			1973072/5
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.			
SEE ATTACHED PAGE 3			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)		ADDITIONAL NAMES ON PAGE 4	
COUNTY	INCORPORATED	REGISTERED OWNERS	LEGAL OWNERS
SKAGHANIA	X	2	1
NAME OF FIRST REGISTERED OWNER		DOE CUSTOMER ACCOUNT NUMBER	
TIMOTHY R. PESCH			
ADDRESS OF FIRST REGISTERED OWNER		CITY	
1451 ALDER ROAD		WASHINGTON	
NAME OF FIRST LEGAL OWNER		ZIP CODE	
THE CIT GROUP/SALES FINANCE INC.		98671	
ADDRESS OF FIRST LEGAL OWNER		DOE CUSTOMER ACCOUNT NUMBER	
P.O. BOX 24610			
CITY		STATE	
OKLAHOMA CITY		OKLAHOMA	
ZIP CODE		73124	
NAME OF FIRST GRANTEE		ADDITIONAL NAMES ON PAGE	
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			
X SEE ORIGINAL TITLE			
SIGNATURE OF FIRST LEGAL OWNER AND TITLE, IF APPLICABLE		SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE	
[Signature]		[Signature]	
NOTARY SEAL OR STAMP		NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
[Notary Seal]		[Signature]	
State of Washington		Signed or attested before me on 12-14-98	
County of Oklahoma		Signed [Signature]	
Printed Name of Applicant		Dealer No. OR AND: County/Office No. OR Notary Expiration Date	
NINA J. GROSSMAN			
Oklahoma County			
Notary Public in and for			
State of Oklahoma			
My commission expires Mar. 31, 2002			
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 JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE
☐ USE TAX EXEMPT Sale to a Certified Title 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 OFFICER'S OPERATOR NUMBER			
DATE			



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT
LEGAL DESCRIPTION OF LAND

BOOK 184 PAGE 848

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check type of application:

- ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

Land: Property Tax Parcel Number 02-05-19-0-0-1600-00

Legal Description:

A PARCEL OF LAND IN SECTION 19 AND 30, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA AND STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

BEGINNING AT THE SECTION CORNER COMMON TO SECTIONS 19 AND 30 AFORESAID: THENCE NORTH 375 FEET ALONG THE WEST LINE OF THE SAID SECTION 19: THENCE IN A SOUTHEASTERLY DIRECTION TO INTERSECTION WITH THE SOUTH LINE OF THE SAID SECTION 19 AT A POINT 605 FEET EASTERLY OF THE POINT OF BEGINNING: THENCE WESTERLY ALONG SAID SOUTH LINE 605 FEET TO THE POINT OF BEGINNING AND ALL THAT PORTION OF THE WEST 605 FEET OF THE NORTHWEST QUARTER OF THE NORTHWEST QUARTER OF THE SAID SECTION 30 LYING NORTHERLY OF THE 300 FOOT STRIP OF LAND ACQUIRED BY THE UNITED STATES OF AMERICA IN CONDEMNATION PROCEEDINGS FOR THE BONNEVILLE POWER ADMINISTRATIONS ELECTRIC POWER TRANSMISSION LINES.

BOOK 184 PAGE 849

OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK TYPE OF APPLICATION: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer in Location

PROPERTY TAX PARCEL NUMBER: 02-05-19-0-0-1600-00

ADDITIONAL GRANTOR(S) REGISTERED/LEGAL OWNER(S)

NAME OF REGISTERED OWNER LEONARD PESCH	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:

SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER	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 46.12.210)

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE

NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE
State of Washington County of _____	Signed or attested before me on _____
by _____ Title _____	Signature _____ Date: No. OR _____ AND: County Office No. OR _____ Notary Expiration Date _____

TD-420-732 APP ATTACHMENT (R-1296) OR Page 2 of 2
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.

133777

184 845

Fidelity National Title Co

Dec 22 2 14 PM '98

Amos

GARY M. OLSON

RETURN ADDRESS

TIMOTHY R. PESCH

LEONARD PESCH

1451 ALDER ROAD

WASHOUGAL, WA 98671

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION	
PLEASE CHECK ONE			
☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY			
1 MANUFACTURED HOME			
TO/PLATE NUMBER 6117435	YEAR 1996	MAKE MARLT	LENGTH/WIDTH/FEET 28 X 60
VEHICLE IDENTIFICATION NUMBER (VIN) R0212150			
2 LAND			
ADDITIONAL LEGAL DESCRIPTION ON PAGE 3			
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED			
PROPERTY TAX PARCEL NUMBER 02-05-19-0-0-1600-00			
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE 19/30/2/5
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.			
SEE ATTACHED PAGE 3			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)			
COUNTY SKAMANIA	INCORPORATED X	UNINCORPORATED	ADDITIONAL NAMES ON PAGE 4
NAME OF FIRST REGISTERED OWNER TIMOTHY R. PESCH			
ADDRESS OF FIRST REGISTERED OWNER 1451 ALDER ROAD			
CITY WASHOUGAL			
STATE WASHINGTON			
ZIP CODE 98671			
NAME OF FIRST LEGAL OWNER THE CIT GROUP/SALES FINANCE INC.			
ADDRESS OF FIRST LEGAL OWNER P.O. BOX 24610			
CITY OKLAHOMA CITY			
STATE OKLAHOMA			
ZIP CODE 73124			
GRANTEE(S)			
NAME OF FIRST GRANTEE			
ADDITIONAL NAMES ON PAGE 4			
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 46.12.210)			
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY:			
☒ SEE ORIGINAL TITLE			
SIGNATURE OF FIRST LEGAL OWNER AND TITLE, IF APPLICABLE			
SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE			
NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
State of Washington County of Skamania			
Signed or attested before me on 12-11-98			
Printed Name of Applicant Notary			
Signature [Signature]			
Dealer No. OR AND: County/Office No. OR Notary Expiration Date			
DEALER'S RECORD OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown.			
DEALER NAME			
PURCHASE PRICE			
TAX JURISDICTION/TAX 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) Angela Moser			
SIGNATURE [Signature]			
COUNTY OFFICE/FS OPERATOR NUMBER 8-01-08			
DATE 12-22-98			

BOOK 184 PAGE 846

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 OFFICE PHONE #
Marlon Morat	509-427-9484
SIGNATURE / POSITION	DATE
Marlon Morat	11-19-98
Building Inspector	

INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW, DEPENDING 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 along with others required to apply for a Certificate of Title for the manufactured home.

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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.)

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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.

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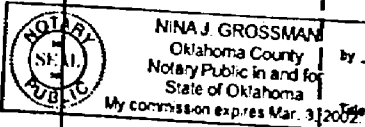
APPLICANTS: Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees.

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BOOK 184 PAGE 847

RETURN ADDRESS

TIMOTHY R. PESCH
LEONARD PESCH
1451 ALDER ROAD
WASHOUGAL, WA 98671

		MANUFACTURED HOME APPLICATION PLEASE CHECK ONE ☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME TPO/PLATE NUMBER: 6117435 YEAR: 1996 MAKE: MARLT LENGTH/WIDTH/FEET: 28 X 60 VEHICLE IDENTIFICATION NUMBER (VIN): R0212150			
2 LAND MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED LOT: BLOCK: PLAT NAME: SECTION/TOWNSHIP/RANGE: 19/30/2/5 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. SEE ATTACHED PAGE 3		TITLE FEES PLUMBING FEE: APPLICATION: MOBILE HOME FEE: ELIMINATION FEE: USE TAX: SUB-AGENT FEES: TOTAL FEES & TAX:	
3 GRANTOR(S) REGISTERED LEGAL OWNER(S) COUNTY: SKAMANIA INCORPORATED: X UNINCORPORATED: ADDITIONAL NAMES ON PAGE 4 NAME OF FIRST REGISTERED OWNER: TIMOTHY R. PESCH DOL CUSTOMER ACCOUNT NUMBER: ADDRESS OF FIRST REGISTERED OWNER: 1451 ALDER ROAD CITY: WASHOUGAL STATE: WASHINGTON ZIP CODE: 98671 NAME OF FIRST LEGAL OWNER: THE CIT GROUP/SALES FINANCE INC. DOL CUSTOMER ACCOUNT NUMBER: ADDRESS OF FIRST LEGAL OWNER: P.O. BOX 24610 CITY: OKLAHOMA CITY STATE: OKLAHOMA ZIP CODE: 73124 GRANTEE(S): ADDITIONAL NAMES ON PAGE 4 NAME OF FIRST GRANTEE: 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 45.12.210) SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: X X SEE ORIGINAL TITLE SIGNATURE OF FIRST LEGAL OWNER AND TITLE, IF APPLICABLE:		I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I / WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE: SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE: SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE:	
NOTARY SEAL OR STAMP 		NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Oklahoma County of: OKLAHOMA Signed or attested before me on: 12-14-98 Printed Name of Applicant: Signature: Nina J. Grossman DEALERSHIP Position/Agent/NOTARY Dealer No. OR AND: County/Office No. OR Notary Expiration Date:	
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: PURCHASE PRICE: 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). 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/VS OPERATOR NUMBER: SIGNATURE: DATE:			

BOOK 184 PAGE 848



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT
LEGAL DESCRIPTION OF LAND

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check type of application: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

Land: Property Tax Parcel Number 02-05-19-0-0-1600-00

Legal Description:

A PARCEL OF LAND IN SECTION 19 AND 30, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA AND STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

BEGINNING AT THE SECTION CORNER COMMON TO SECTIONS 19 AND 30 AFORESAID; THENCE NORTH 375 FEET ALONG THE WEST LINE OF THE SAID SECTION 19; THENCE IN A SOUTHEASTERLY DIRECTION TO INTERSECTION WITH THE SOUTH LINE OF THE SAID SECTION 19 AT A POINT 605 FEET EASTERLY OF THE POINT OF BEGINNING; THENCE WESTERLY ALONG SAID SOUTH LINE 605 FEET TO THE POINT OF BEGINNING AND ALL THAT PORTION OF THE WEST 605 FEET OF THE NORTHWEST QUARTER OF THE NORTHWEST QUARTER OF THE SAID SECTION 30 LYING NORTHERLY OF THE 300 FOOT STRIP OF LAND ACQUIRED BY THE UNITED STATES OF AMERICA IN CONDEMNATION PROCEEDINGS FOR THE BONNEVILLE POWER ADMINISTRATIONS ELECTRIC POWER TRANSMISSION LINES.

BOOK 184 PAGE 849

OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK TYPE OF APPLICATION: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer in Location

PROPERTY TAX PARCEL NUMBER: 02-05-19-0-0-1600-00

ADDITIONAL GRANTOR(S) REGISTERED/LEGAL OWNER(S)	
NAME OF REGISTERED OWNER LEONARD PESCH	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:	
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER	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 46.12.210)	
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:	
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARY SEAL OR STAMP	
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
State of Washington County of _____	Signed or attested before me on _____
by _____ Printed Name of Applicant	Signature _____
Title _____ DEALERSHIP Position/Agent/NOTARY	Dealer No. OR AND: County Office No. OR Notary Expiration Date _____

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.