

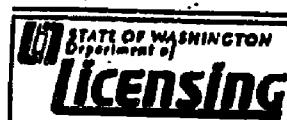
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BOOK 186 PAGE 906

SKAMANIA RECORDS  
SKAMANIA CO., WASH.  
3000 STATE ST.

FEB 26 10 53 AM '99  
ANGELA MOSER  
GARY H. OLSON

## RETURN ADDRESS



## MANUFACTURED HOME APPLICATION

PLEASE CHECK ONE

TITLE ELIMINATION  TRANSFER IN LOCATION  REMOVAL FROM REAL PROPERTY

## 1 MANUFACTURED HOME

TD/PLATE NUMBER +127764	YEAR 97	MAKE REDMA	LENGTH/HEIGHT 48 X 26	VEHICLE IDENTIFICATION NUMBER (VIN) 11823861
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## 2 LAND

## ADDITIONAL LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED PROPERTY TAX PARCEL NUMBER  
03-08-29-4-1-0902-00

LOT	BLOCK	PLAYNAME	SECTION/TOWNSHIP/ RANGE
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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. A tract of land in the Southeast Quarter of the Northeast Quarter of Section 29, Township 3 North, Range 8 East of the Willamette Meridian in the County of Skamania, State of Washington, described as follows: Lot 2 of the BURKE SHORT PLAT, recorded in Book 3 of Short Plats, Page 280, Skamania County Records

## TITLE FEES

## TITLE FEE

## APPLICATION

## MANUFACTURED HOME FEE

## ELIMINATION FEE

## TAX

## REMOVAL FEE

## TOTAL FEE &amp; TAX

## 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

## ADDITIONAL NAMES ON PAGE

COUNTY 30	INCORPORATED XX	UNINCORPORATED XX	1 REGISTERED OWNER 2	1 LEGAL OWNER 1
NAME OF FIRST REGISTERED OWNER Keith Chamberlain				DOL CUSTOMER ACCOUNT NUMBER
ADDRESS OF FIRST REGISTERED OWNER PO Box 442	CITY North Bonneyville			STATE ZIP CODE WA 98639
NAME OF FIRST LEGAL OWNER Bank of America				DOL CUSTOMER ACCOUNT NUMBER
ADDRESS OF FIRST LEGAL OWNER 4000 Kruse Way Place, Bldg 1	CITY Lake Oswego			STATE ZIP CODE OR 97035
GRANTEE(S)				ADDITIONAL NAMES ON PAGE
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 46.12.210)

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY:  *Angela Moser*

SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE  
 SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE

NOTARY PUBLIC PAULA SEAMAN COMMISSION EXPIRES OCTOBER 8, 2001 STATE OF WASHINGTON	NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE <i>Skamania</i> Signed in Skamania County of by <i>Paula Seaman</i> Printed Name of Appraiser Title NOTARY DEALERSHIP PERSONAL/NOTARY
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Signed in Skamania  
County of  
by *Paula Seaman*  
Printed Name of Appraiser  
Title  
NOTARY  
DEALERSHIP PERSONAL/NOTARY

Date: *Jan. 15, 1999*  
Dealer No. OR  
AND County/Office No. OR  
Notary Expiration Date: *10-8-2001*

DEALER'S REPORT OF SALE: I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

DEALER NAME: *Angela Moser* WA DEALER NUMBER: *30-01-03* DATE OF SALE: *2-26-99*

PURCHASE PRICE: *\$10,000.00* TAX JURISDICTION/TAX RATE: *0%* DEALER'S AUTHORIZED SIGNATURE: *Angela Moser*

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* COUNTY OFFICE/VS OPERATOR NUMBER: *30-01-03*

SIGNATURE: *Angela Moser* DATE: *2-26-99*

TD-420-732 MANUF HOME APPL 1993-94 Page 1 of 2

INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE SIDE

<b>5 TITLE COMPANY CERTIFICATION</b>	
I certify that the legal description of the land and ownership is true and correct for the real property records.	
NAME	TITLE COMPANY/PHONE NUMBER
SIGNATURE/POSITION	
Print this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.	
<b>6 BUILDING PERMIT OFFICE CERTIFICATION</b>	
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	Building Inspector
DATE 2-19-99	

**INSTRUCTIONS**

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

- Manufactured Home Title Elimination Application (complete boxes 1, 2, 3, 4 and 6). Use to eliminate a site for a manufactured home which is to become real property.
- 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.
- Manufactured Home Removal From Real Property Application (complete boxes 1, 2, 3, 4 and 6). Use when taking a manufactured home whose site has been previously eliminated. Once property 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/SHE/ 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 46.12 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 site 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 site 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, 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.

OWNERSHIP BOOK 186 PAGE 908

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:** 03-08-29-4-1-0902-00

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER <i>Dava Chamberlain</i>	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 <i>Jonathan R Botticelli</i>	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
<b>SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:</b>	
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)	
<b>I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:</b>	
SIGNATURE OF REGISTERED OWNER	DATE
<b>NOTARY SEAL OR STAMP</b>	
OFFICIAL SEAL <b>RITA BRINKMAN</b> NOTARY PUBLIC - OREGON COMMISSION NO. 301857 MY COMMISSION EXPIRES JUNE 28, 2001	NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE
	State of Washington County of <i>OREGON RS</i> <i>Clackamas</i> Printed Name of Applicant <i>Jonathan R Botticelli</i> Title <i>Notary</i> DEALERSHIP Posed/Agent/NOTARY
Signed or attested before me on <u>1-20-99</u> Signature <i>Rita Brinkman</i> Dealer No. OR AND: County/Office No OR Notary Expiration Date <u>6-20-01</u>	

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TD-420-732 APP ATTACHMENT (REV 12/96) OR Page 2 of 2