

137462

BOOK 196 PAGE 847

SRAHAGIA CO. 11111

FEB 24 9 46 AM '00

A. Moser

GARY J. OLSON

RETURN ADDRESS

MANUFACTURED HOME
APPLICATION

PLEASE CHECK ONE

- ☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ REMOVAL FROM REAL PROPERTY

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 48.12.210)

1 MANUFACTURED HOME

TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH (FEET) VEHICLE IDENTIFICATION NUMBER (VIN)
2000 LK Pointe 48.1 X 27 ORFLX48A26787-1P13

2 LAND

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
02-05-27-0-0-0803-00

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE
1 Clifford Orth Short Plat

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS
30 2 1

NAME OF REGISTERED OWNER

Andrea P. McNealy

NAME OF ADDITIONAL REGISTERED OWNER

Chris L. McNealy

ADDRESS CITY STATE ZIP CODE
2813 NE 282nd Avenue Camas WA 98607

NAME OF LEGAL OWNER

Green Tree Financial

UBI # 601 628 402

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE
7662 SW Mohawk Tualatin OR 97062

GRANTEE

NAME

DEPARTMENT OF LICENSING

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

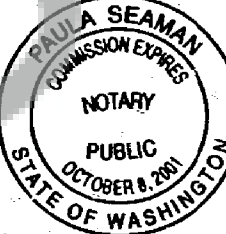
Signature of Registered Owner and Title, IF APPLICABLE

Andrea P. McNealy

Signature of Additional Registered Owner and Title, IF APPLICABLE

Chris L. McNealy

NOTARY SEAL OR STAMP



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of SKAGAMIA

Signed or attested before me on 9-15-99

by Andrea P. McNealy

Signature Paula Seaman

PRINT NAME OF REGISTERED OWNER

NOTARY OR AGENT

PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY

Title

AND: County/Office No. OR 1082001

DEALERSHIP POSITION/AGENT/NOTARY

Notary Expiration Date

4 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME (TYPED OR PRINTED)

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.

5 BUILDING PERMIT OFFICE CERTIFICATION

I certify that: ☒ the manufactured home has been affixed to the real property as described.

☐ a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED)

BLDG PERMIT OFFICE/PHONE #

BLDG PERMIT #

Marlon Morat

(509)427-9484

184-99


SIGNATURE / POSITION

DATE

Building Inspector

2-23-2000

BOOK 196 PAGE 848

6 SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <u>Cindy Queen LP Concess (formerly Green Tree)</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of <u>Washington</u>		Signed or attested before me on <u>11/17/99</u>	
		County of <u>Washington</u>		Signature <u>Natasha Ryder</u>	
		Title <u>Notary</u>		PRINTED NAME OF NOTARY <u>Natasha Ryder</u>	
		DEALER'S POSITION/AGENT/NOTARY		AND: County Office No. OR Dealer No. OR <u>11/26/00</u> Notary Expiration Date	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
The North 237 feet of the South 983 feet of the West 920 of the West Half of the Northwest Quarter of Section 27, Township 2 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington.					
Also known as Lot 1 of the Clifford Orth Short Plat, recorded in Book 2 of Short Plats, Page 71, Skamania County Records.					
8 DEALER'S REPORT OF SALE					
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.					
DEALER NAME (TYPED OR PRINTED)			WA DEALER NUMBER	DATE OF SALE	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE			
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)					
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/YES OPERATOR NUMBER		
SIGNATURE			DATE		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
IMPORTANT: Once the application has been approved by the County Auditor / Vehicle Licensing 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. Vehicle licensing subagents charge a service fee.					
For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.					

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.