139497

RETURN ADDRESS

FILED FOR RECORD
SKAMAN ASIA COSHI
BY THE SHAME COS

OCT 27 10 47 AN '00 CL/NOSEZ

AUGITOR
GARYM OLSON

,				-	<i>.</i>	OUDITOR
				-	GAR	Y M. OLSON
		-				for all
: 						Cores a
						2-26
	 			-		1000
			<u> </u>	-	- 466	Cares
STATE OF WASHING	TON	MANUE	ACTURED H	IOME	PLEASE C	HECK ONE
licenci	inc		PLICATION	111 (2)x	LE ELIMINATI	ON
LICEII3				. GIMA	ANSFER IN LO	CATION
Anyone who knowing	ly makes a fa	iso statement o	f a material fact is g	ulity LIRE	MOVAL FROM	REAL PROPERTY
of a felony, and upon	CONVICTION	nay be punished	by a fine, imprison	ment, or both. (RC	W 46.12.210)	* T
MANUFACTURED TPO / PLATE NUMBER						
+34734	1987	MAKE FLTWD	LENGTHWOTH(FEET)	VEHICLE IDENTIFICAT	TION NUMBER (VIN)	
2 LAND	1 1967	FLUIND	48 X 28	RFLAM2AH074		
				L DESCRIPTION O		
MANUFACTURED HO	ME WILL 8E	AFFIXED	REMOVED	PEAL PROPERTY	TAX PARCEL NUVBE -0-0-1003-	ER OO
LOT BL	ООК	PLAT NAME		134 01-33	SECTION/TOWN	
			466		Sectionations	HIMPANCE !
3 GRANTOR(S) RECOUNTY NUMBER	GISTEREDIL			TIONAL NAMES C	N PAGE	
30	. •	NUMBER (F REGISTERED OWNERS		BER OF LEGAL OWN	EAS
NAME OF REGISTERED DW	NEB		- 2		1	
Elmer J. Ham	F 1		7	7		
NAME OF ADDITIONAL REG	STERED OWNER	9				
Delia A. Ham	ilton	_	L TOL			7
ADDRESS			CITY		STATE	ZIP CODE
7/2 B/L	ckleds	e Ro.	d cons	اد	w A	98610
Washtenaw Mo	rtgage C	ошрапу			1 44	7
	COMMEN				7	
ADDRESS			CITY			
315 E. Eisen	hower Pa	rkwav #12	ann Arbor	24.5		ZIP CODE
GRANTEE		7 7 7 2	ann Arbor	P11	chigan	48108
NAME .		6				
Departmen	t of Lic	ensing				
I DO SOLEMNLY ATT VEHICLE AND THIS IS	EST UNDER	PENALTY OF P	ERJURY THAT I / W	E AWARE THE RE	GISTERED OW	NER(S) OF THIS
		1		0/	1-/	
Signature of	Registered O	wner and Tritle, IF	APPLICABLE	Clan (May G	
Signature of Additional	Registered O	wner and Titte 1F	APPLICABLE (/	Much	AL.	
NOTARY SEAL OR STA	MP.		TION/CERTIFICATIO	N FOR DECIPIES	mellets:	
Notary P	· 1012	te of Washington		0:		SIGNATURE
State of Was	hington	County of	- Stanon		d or attested refore me on	11-12-99
JAMES R COP	•	Elmor	- 11 · · ·			
MY COMMISION			J Hami	Signature	1/2 B	y tol 3
September 1	3,2,03	Delin	A. Honit	40 -	NOTATY OR AGENT	
	. "	PRINT NAME OF RE	GISTERED OWNER		WE OF NOTARY	2/2/-11/ 71
	Tito	· /	Vetary	AND	County-Office N	o. OP. O. (3)
4 TITLE COMPANY		DEALERSHIP POSIT	IONAGENTANOTARY	AND	Dealer N Notary Expiration	
	Scription of the	ON				
Certify that the legal de	Scapouror pr	e land and owner	iship is true and corre	ct per the real prop	erty records.	
			mu	COMPANY / PHONE N	UMBER	
SIGNATURE / POSITION					,	
	·				-	DATE
Finalize this application	on with a Lice	nsing Agant wi	thin 10 calendar day	s of the date Title	Company Pens	sentative sign
	- ST TIOL CE	THURST				someore signs.
I certify that:	the manufact	tured home has b	een affixed to the rea	property as descri	bed.	
NAME (TYPED OR PRINTED	a comment in the	mit has been iss	ued for this purpose a	viid the attachment i	will be inspected	upon completion.
Marlon Mor			DG PERMIT OFFICE/PHO (509)427	NE F -	BLDG PERMI	
SIGNATURE / POSITION	(M	77	(303)421	-2404		
Master	07/10	Dax-	,Build	ing Inspe	ctor 1-	DATE -10-2000

ROOK 203 PAGE 883

6 SIGNATURE OF LEGAL	WNER		- 9	- 65 .
SIGNATURE OF LEGAL OW	NER INDICATES CONSESSES			
Signature of Legal C	NER INDICATES CONSENT FOR Owner and Tide, IF APPLICABLE	WASHTENAW M KABEN A HEI	ITLE/RESCWA ORTGAGE COMP NHICHS: VICE	ANY PRESIDENT
Signature of Additional Legal O	wner and Title, IF APPLICABLE	Jan A9	14.00	VO
MOTARI SEAL OR STAMP		F 7	nwaer	7
NOTON A	State of WASHI County of WASHI	ENTIFICATION FOR GAN ENAW	Signed or attested before me on	1.1
AURUS	PRINT NAME OF LEGAL OWNER	s	gnature Han	e J. Jenne
GCUAT COM	PRINT NAME OF LEGAL OWNER	PR	AYC V. JCIL	Y
The state of the s	DEALERSHIP POSITION/AGENTA	OTARY	PANTUR 12 2 1 Dea	Jer No OR
LAND DESCRIPTION (A le	gal description of the land can	e obtained from the	local County Asset	acon train
or Washington, des	the Northwest Quar te Willamette Meridi cribed as follows:	in the Co	ounty of Skar	ania, State
Lot 3 of the Revis Plats, Page 33, Sk	ed Hollenberry Shor amania County Record	Plat, records.	ded in Book	2 of Short
	N			
			- 46	. "
DEALER'S REPORT OF SA	I.F.			
I CERTIFY THAT THIS INFO	MATION IS CORDERS	HICLE IS CLEAR OF	ENCHMODANICE	
ANY REQUIRED SALES TAN ALER NAME (TYPED OR PRINTED)	HAS BEEN COLLECTED.		ENCOMBRAJACES	EXCEPT AS SHOWN
	7	WA DEA	ER NUMBER	DAYE OF SALE
RCHASE PRICE TAX J	PISCICTION TAX PATE DEALER'S AU	THORIZED SIGNATURE		
USE TAX EXEMPT Sa	le to a Certified Total	7 1	<u> </u>	
COUNTY AUDITOR/AGENT	le to a Certified Tribal member on t	he reservation (attact	notarized statement	of delivery).
ertify that the above application a	DOORS IN THE APPROVA	L: (Not for use by S	ubagents)	
P recording of this form. ME (TYPED OR PRINTED)	ppears to have been completed co	rectly, and the applica	nt has sufficient docu	mentation to proceed wi
Angle M	1020	COUNTY	OFFICENTS OPERATOR	NUMBER
NATURE	Vice y		<u> 30-01-</u>	-08
TITLE FEES	Messer	40	P	10-27-CO
NG FEE APPLICATION				10 21-00
	MOBILE HOME FEE	ELMINATION FEE	USE TAX	SUBAGENT FEES
		÷		TOTAL FEES & TAX
Retain	he application has been appring Office, take your application proof of the recording fees priginal application form, obtain	or rosus to the Cor	inty Recording Of	fice.
APPLICANTS:	Once recorded, you must re Manufactured Home Applica- licensing subagents charge	tum to a Vehicle Lation, paying all recast a service fee.	icensing office to quired fees. Vehic	file the le
For full instructions of Transfer in Locati	on completing this form for Ti ion, see form TD-420-730, M.	tle Elimination, Re anufactured Home	moval from Real I	Property

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

TD-420-729 MANUF HOME APPL (RVM98)OR Page 2 of 2