

139876

REC-205 11-2-116  
FILED  
SKAMIA WASH  
Brett Eakins  
Dec 11 12 59 PM '00  
GARY M. OLSON

RETURN ADDRESS

Brett & Becky Eakins  
162 Panda Rd.  
Washougal, WA  
98671

**STATE OF WASHINGTON Department of LICENSING** **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 46.12.210)

**1 MANUFACTURED HOME**

TPC / PLATE NUMBER \$ 85229	YEAR 1979	MAKE ParkV	LENGTH/WIDTH/FEET 70X14	VEHICLE IDENTIFICATION NUMBER (VIN) 14A70PVFD14X90412
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**2 LAND** **LEGAL DESCRIPTION ON PAGE**

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER  
02-05-30-0-0-0301-00

LOT 2	BLOCK	PLAT NAME Cummins Short	SECTION/TOWNSHIP/RANGE
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**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** **ADDITIONAL NAMES ON PAGE**

COUNTY NUMBER 30	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER  
Brett Hy Eakins  
NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS CITY STATE ZIP CODE  
162 Panda Rd. Washougal WA 98671  
NAME OF LEGAL OWNER  
Brett Hy Eakins  
NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE  
162 Panda Rd. Washougal WA 98671

**GRANTEE**  
NAME

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

Signature of Registered Owner and Title, IF APPLICABLE *Brett Eakins*

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**

State of Washington County of Skamania Signed or attested before me on Nov. 29, 00  
by Brett Hy Eakins Signature *Margie Mase*  
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT  
by Title Agent AND: County Office No. OR Dealer No. OR Notary Expiration Date 30-01-08

**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) Marlon Morat	BLDG PERM.T OFFICE/PHONE # 509-429-9484	BLDG PERM.T #
SIGNATURE / POSITION <i>Marlon Morat</i> , Building Inspector	DATE 12-8-00	

TD-423-722 MANUF HOME APPL (4/8/98) OR Page 1 of 2

001016

BOOK 205 PAGE 117

<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>				
	State of Washington		Signed or attested before me on _____		
	County of _____		by _____ Signature _____		
	by _____ PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT		
	by _____ PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY		
Title _____ DEALERSHIP, POSITION, AGENT, NOTARY		AND: County Office No. OR Dealer No. OR Notary Expiration Date			
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
Lot 2 of the Cummings Short Plat recorded in Book 2 of Short Plats, Page 207 Skamania County Records.					
<b>8 DEALER'S REPORT OF SALE</b>					
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).					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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 VFS OPERATOR NUMBER		
SIGNATURE			DATE		
Angela Moser			30-01-05		
Angela Moser			12-11-06		
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p><b>IMPORTANT:</b> 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.</p> <p><b>APPLICANTS:</b> 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.</p> <p>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.</p>					

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 502-3600 or TDD (360) 664-8885.

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