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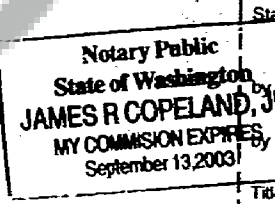
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FILED FOR RECORD
SKAMANIA CO. WASH
BY SKAMANIA CO. TITLE

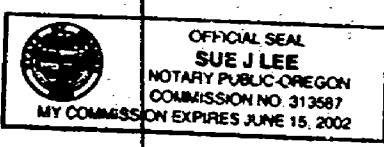
AUG 8 1 36 PM '01

AMUSE
AUDITOR
GARY M. OLSON

RETURN ADDRESS

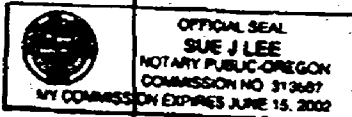
STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)				☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPC / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2001	Greenbriar	44 X 28	2191-0350-N AB	
2 LAND					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				04-07-27-0-0-0802-00	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
2		Walter Morat Shert Plat			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
30		1		1	
NAME OF REGISTERED OWNER					
Clay Moser					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS					
401 Hester Road					
CITY					
CARSON					
STATE					
WA					
ZIP CODE					
98610					
NAME OF LEGAL OWNER					
Washington Mutual					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
5285 SW Meadows Road STE 451					
CITY					
Lake Oswego					
STATE					
OR					
ZIP CODE					
97035					
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					
Clay Moser					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of Skamania		before me on 8-14-00	
		NAME OF REGISTERED OWNER		Signature	
		Clay Moser		James R. Copeland, Jr.	
NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY		COUNTY OFFICE NO. OR	
Clay Moser		James R. Copeland, Jr.		Dealer No. OR	
Title		AND:		Notary Expiration Date	
Notary				9-13-03	
DEALERSHIP POSITION/AGENT/NOTARY					
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 #					
DATE					
Mardon Morat, Building Inspector					

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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>Suzanne M. Hall</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of <u>Oregon</u> County of <u>Clackamas</u>		Signed or attested before me on <u>8/28/00</u>	
		by <u>Suzanne M Hall</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY/AGENT	
		by <u>Suzanne M Hall</u>		PRINTED NAME OF NOTARY <u>Sue J Lee</u>	
PRINT NAME OF LEGAL OWNER		Title <u>Operation Manager</u>		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>6-15-2002</u>	
DEALERSHIP POSITION/AGENT/NOTARY					
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the Southeast Quarter of the Northeast Quarter of Section 27, Township 4 North, Range 7 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 2 of the Walter Morat Short Plat, recorded in Book 3 of Short Plat, Page 266, 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			
☐ 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/VFS OPERATOR NUMBER		
SIGNATURE <u>Angela Moser</u>			DATE <u>8-8-01</u>		
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.

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2 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>Stephanie M. Ball</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of <u>Oregon</u> County of <u>Clatsop</u>		Signed or attested before me on <u>8/28/00</u>	
		by <u>Stephanie M. Hall</u>		Signature <u>[Signature]</u>	
		by <u>Stephanie M. Hall</u>		Signature <u>Sue J. Lee</u>	
		Title <u>Operation Manager</u>		AND: County/Office No. OR _____ Dealer No. OR _____ Notary Expiration Date <u>7-15-2002</u>	
3 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the Southeast Quarter of the Northeast Quarter of Section 27, Township 4 North, Range 7 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 2 of the Walter Morat Short Plat, recorded in Book 3 of Short Plat, Page 266, Skamania County Records.					
4 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.					
VEHICLE MAKE (TYPE OR PRINTED) <u>Columbia</u>		VEHICLE MODEL <u>MG. Holmes</u>		DATE OF SALE <u>3-2-00</u>	
PURCHASE PRICE <u>49,525.00</u>		TAX EXEMPTION RATE <u>7%</u>		DEALER'S AUTHORIZED SIGNATURE <u>Michelle Wolcott</u>	
☒ USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
5 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 (TYPE OR PRINTED)		COUNTY OFFICER'S OPERATOR NUMBER			
SIGNATURE		DATE			
6 FEES					
PLANS FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
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