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BOOK 216 PAGE 231

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... BEAMANIA CO, TULL

Oct 30 11 37 AM '01

Smuser  
GARY H OLSON

RETURN ADDRESS

**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**

TPO / PLATE NUMBER	YEAR	MAKE	LENGTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
X057892	1993	FLTWD	28 X 66	ORFLN48AB15191GH

**2 LAND**

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
03-75-36-3-2-2090-00

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE

1 Ridge view Tract

**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  
William R. Jones

NAME OF ADDITIONAL REGISTERED OWNER  
Mindy L. Jones

ADDRESS CITY STATE ZIP CODE  
670 NE Bone Road Stevenson WA 98648

NAME OF LEGAL OWNER  
Mortgage Market Inc.

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE  
9020 SW Washington Square Dr. Tigard OR 97223

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 *William R. Jones*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Mindy L. Jones*

NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE
<p>Notary Public State of Washington JAMES R COPELAND JR MY COMMISSION EXPIRES September 13, 2003</p>	<p>State of Washington County of Skamania Signed or attested before me on 10-3-01</p> <p>Signature <i>J. R. Copeland</i> NOTARY AGENT PRINTED NAME OF NOTARY James R. Copeland Jr County/Office No. OR Dealer No. OR Notary Expiration Date 9-13-03</p>
<p>PRINT NAME OF REGISTERED OWNER by PRINT NAME OF REGISTERED OWNER Title DEALERSHIP POSITION/AGENT/NOTARY</p>	

**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 #

Dave Nail

SIGNATURE / POSITION

**6 SIGNATURE OF LEGAL OWNER**

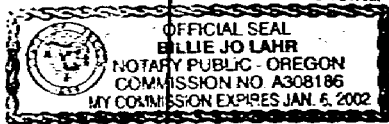
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

*Garnie Chalorn*

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP



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

State of Oregon

County of MULTNOMAH

Signed or attested before me on 10/20/01

by Billie Jo Lahr  
PRINT NAME OF LEGAL OWNER

Signature Billie Jo Lahr  
NOTARY SEAL

by Billie Jo Lahr  
PRINT NAME OF LEGAL OWNER

BILLIE JO LAHR  
PRINTED NAME OF NOTARY

Title DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR  
Dealer No. OR  
Notary Expiration Date

**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

A portion of Lot 1 Ridge View Tracts according to the recorded plat thereof, recorded in Book A of Plats, Page 150, in the County of Skamania, State of Washington, described as follows:  
Lot 2 of the Short Plat recorded in Book T of Short Plats, Page 17, Skamania County Records.  
Except that portion lying within Road.

**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) <u>Angela Moser</u>	COUNTY OFFICE/VS OPERATOR NUMBER <u>30-01-05</u>
SIGNATURE <u>Angela Moser</u>	DATE <u>10-30-01</u>

**10 TITLE FEES**

FLING 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.