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SKY
BY GRANABIA CO. ILL.

Oct 31 4 13 PM '01

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 48.12-210)				☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPD/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH/HEIGHT	VEHICLE IDENTIFICATION NUMBER (VIN)	
4073775	1994	Goldw	27 X 52	WH14388	
2 LAND					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				03-08-26-0-0519-00	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
2		Robert W. Barnes			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
30	2		1		
NAME OF REGISTERED OWNER					
Lowell J. Leetch					
NAME OF ADDITIONAL REGISTERED OWNER					
Kristi A. Leetch					
ADDRESS					
62 Elk Bluff Drive					
CITY					
Hone Valley					
STATE					
WA					
ZIP CODE					
98648					
NAME OF LEGAL OWNER					
First Franklin Financial Corp					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
2300 Main Street #B					
CITY					
Irvine					
STATE					
CA					
ZIP CODE					
92614					
GRANTEE					
NAME					
DEPARTMENT OF LICENSING					
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/WE ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE <i>Lowell J. Leetch</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Kristi A. Leetch</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
PAULA SEAMAN COMMISSION EXPIRES NOTARY PUBLIC OCTOBER 8 2001 STATE OF WASHINGTON		State of Washington County of <i>Sikamania</i> Signed or attested before me on <i>1-25-01</i> by <i>Lowell J. Leetch</i> PRINT NAME OF REGISTERED OWNER by <i>Kristi A. Leetch</i> PRINT NAME OF REGISTERED OWNER Title <i>Notary</i> DEALERSHIP POSITION/AGENT/NOTARY			
		Signature <i>Paula Seaman</i> NOTARY OR AGENT PRINTED NAME OF NOTARY AND: County/Office No. OR <i>10-8-01</i> Dealer No. OR 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)					
Marlon Morat					
BUILDING PERMIT OFFICE/PHONE #					
509-427-9484					
BUILDING PERMIT #					
DATE					
2-07-01					

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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 <i>X Julie Ellis</i>	
Signature of Additional Legal Owner and Title, IF APPLICABLE	
NOTARY SEAL OR STAMP	
	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE
State of <u>CALIFORNIA</u> County of <u>ORANGE</u>	Signed or attested before me on <u>January 29, 2002</u>
by <u>Julie Ellis</u> PRINT NAME OF LEGAL OWNER	Signature <i>[Signature]</i> NOTARY OR AGENT
by PRINT NAME OF LEGAL OWNER	<u>GARRICK SULLIVAN</u> PRINTED NAME OF NOTARY
Title DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>May 7, 2002</u>
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 Southwest Quarter of the Northeast Quarter of Section 26, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows: Lot 2 of the Robert W. Barnes Short Plat, Home Valley No. 1, according to the recorded Short Plat, recorded in Book 2 of Plats, Page 152, 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)	
PURCHASE PRICE	WA DEALER NUMBER
TAX JURISDICTION/TAX RATE	DATE OF SALE
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)	
SIGNATURE	COUNTY OFFICE/VS OPERATOR NUMBER
<i>Angela Moser</i>	<u>30-01-08</u>
<i>Angela Moser</i>	DATE
<u>10-31-01</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.	