

BOOK 231 PAGE 403

Oct 29 11 46 AM '02

J. HIGDON, S. J. HIGDON

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 x WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
X129737	1996	REDMN	28 X 56	11822162	
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED REAL PROPERTY TAX PARCEL NUMBER 02-06-34-0-0-0203-00					
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
4		Hart Short Plat			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
70		2		1	
NAME OF REGISTERED OWNER					
WILLIAM C. VANLANEN					
NAME OF ADDITIONAL REGISTERED OWNER					
MARGARET A. VANLANEN					
ADDRESS					
PO Box 633		Stevenson		STATE	ZIP CODE
				WA	98643
NAME OF LEGAL OWNER					
WELLS FARGO HOME MORTGAGE, INC.					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
7320 SW Hunziker Street #208		Portland		STATE	ZIP CODE
				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 <i>William C. Van Lanen</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Margaret A. Van Lanen</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
Notary Public State of Washington JAMES R COPELAND, JR MY COMMISSION EXPIRES September 13, 2003		State of Washington		Signed or attested before me on 4-12-02	
		County of Strommen			
		PRINT NAME OF REGISTERED OWNER		Signature <i>James R Copehead Jr</i>	
		PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY James R Copehead Jr	
Title NOTARY		DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 9-17-03	
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 #	
Marlon Morat		509-427-9484		461*	
SIGNATURE / POSITION		DATE			
<i>Marlon Morat</i>		Building Inspector		4-26-02	

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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 _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington County of _____		Signed or attested before me on _____	
		by _____ PRINT NAME OF LEGAL OWNER		Signature _____ 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	
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 East Half of the Northwest Quarter of Section 34, Township 2 North, Range 6 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 4 of the Hart Short Plat recorded in Book 3 of Short Plats, Page 271, 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)			VIA 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			DATE		
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					
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Signature of Legal Owner and Title, IF APPLICABLE <i>Julie E. Melcher</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington <i>Oregon</i>		Signed or attested before me on <i>7/12/02</i>	
		County of <i>Washington</i>		Signature <i>Julie E. Melcher</i>	
		by <i>Wells Fargo Home Mtg</i>		NOTARY OR AGENT	
		PRINTED NAME OF NOTARY <i>Julie E. Melcher</i>		County/Office No. OR <i>445300</i>	
		AND: Dealer No. OR <i>445300</i>		Notary Expiration Date	
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SIGNATURE		DATE			
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