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SPRING WASH
BY KAMAHIA CO. HILL

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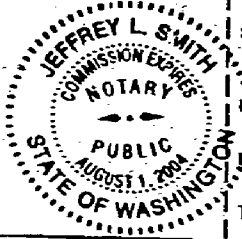
J. MICHAEL GAVINSON

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 4B.12.210)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
\$80262	1980	PACFA	64 X 28	SD2789AB	
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 03-08-26-0-0-0802-00					
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
			S26, T3N, R8E		
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					
Robert K. Jorgensen					
NAME OF ADDITIONAL REGISTERED OWNER					
Karen V. Jorgensen					
ADDRESS					
911 Wind Mountain Rd Stevedon WA 98648					
NAME OF LEGAL OWNER					
Accel Mortgage Corporation					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
12214 Mill Plain Blvd 200 Vancouver WA 98684					
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 Robert K Jorgensen					
Signature of Additional Registered Owner and Title, IF APPLICABLE Karen V. Jorgensen					
NOTARY SEAL OR STAMP					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of Skagitia Signed or attested before me on 5-29-01					
Notary Public State of Washington JAMES R COPELAND JR MY COMMISSION EXPIRES September 13, 2003					
Signature of Registered Owner					
Signature of Notary					
PRINTED NAME OF NOTARY					
AND: County/Office No. OR Dealer No. OR Notary Expiration Date 9-13-03					
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)					
BLOG PERMIT OFFICE/PHONE #					
BLOG PERMIT #					
SIGNATURE / POSITION					
DATE					
4-22-02					

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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 <i>Scott Moe / Accl Mts Corp</i>					
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 <i>Clark</i>		Signed or attested before me on <i>5-29-02</i>			
PRINT NAME OF LEGAL OWNER <i>SCOTT MOE / ACCL MTS CORP</i>		Signature <i>Jeffrey L. Smith</i>			
PRINT NAME OF LEGAL OWNER _____		PRINTED NAME OF NOTARY <i>JEFFREY L. SMITH</i>			
Title <i>ACCL MTS</i>		County/Office No. OR AND: Dealer No. OR Notary Expiration Date <i>8-1-04</i>			
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 Northwest Quarter of the Southeast 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: Beginning at the Southeast corner of the North half of the Northeast Quarter of the Southwest Quarter of the said Section 26; thence North 81°30' east 380 feet, more or less, centerline of the Wind Mountain County Road; thence Northwesterly along the centerline of said road 470 feet, more or less, to intersection with the West line of the Northwest Quarter Southeast Quarter of the said Section 26; said tract containing.					
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).					
COUNTY AUDITOR/VEHICLE 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) <i>Peggy Lowry</i>		COUNTY OFFICE/VFS OPERATOR NUMBER <i>30 01 06</i>			
SIGNATURE <i>P. Lowry</i>		DATE <i>11/4/02</i>			
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) 654-8885.