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FILED FOR CRU
SEALED FOR WASH
BY CLARK COUNTY TITLE

Nov 14 2 27 PM '02

J. MICHAEL WILSON

RETURN ADDRESS

CLARK COUNTY TITLE
Stonemill Professional Plaza
217 S.E. 136th Ave., Suite 104
Vancouver, WA 98684

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)				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER +254710	YEAR 1999	MAKE SKYLI	LENGTH/WIDTH (FEET) 66 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 21910418MAB	
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 02-05-30-0-1805					
LOT 4	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE ROBSON SHORT PLATS		QUARTER/QUARTER SECTION Sec 30, T2N, R5E WM	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER SKAMANIA		NUMBER OF REGISTERED OWNERS 2		ADDITIONAL NAMES ON PAGE NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER MCCUAN, ERIC P.		DOL CUSTOMER ACCOUNT NUMBER MCCUAEP280Q9			
NAME OF ADDITIONAL REGISTERED OWNER MCCUAN, KRISTINA L.		DOL CUSTOMER ACCOUNT NUMBER MCCUAKL277LC			
ADDRESS 382 ROBSON ROAD		CITY WASHOUGAL		STATE ZIP CODE WA 98671-7382	
NAME OF LEGAL OWNER WASHINGTON MUTUAL BANK		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS 1201 MAIN STREET		CITY VANCOUVER		STATE ZIP CODE WA 98660	
GRANTEE					
NAME STATE OF WASHINGTON					
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>Eric P. McCuan</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Kristina L. McCuan</i>					
NOTARY SEAL (C) STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
T. L. BARRETT NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES JUNE 9, 2004		State of Washington County of <i>Clark</i> Signed or attested before me on <i>9/30/02</i> Signature <i>Eric P. McCuan</i> Signature <i>Kristina L. McCuan</i> Signature <i>T. L. Barrett</i> PRINTED NAME OF REGISTERED OWNER PRINTED NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY Title <i>Notary</i> AND: County/Office No. OR Dealer No. OR <i>6/9/04</i> 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) TAMARA BARRETT		TITLE COMPANY / PHONE NUMBER CLARK COUNTY TITLE 882-9088			
SIGNATURE / POSITION		DATE			
Finalize this application with a Licensing Agent within 19 calendar days of the date Title Company Representative signs.					
5 BUILDING PERMIT OFFICE CERTIFICATION					
I certify that: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.					
NAME (TYPED OR PRINTED) Marlon Morat		BLDG PERMIT OFFICE/PHONE # 509-427-9484		BLDG PERMIT # 221-00	
SIGNATURE / POSITION <i>Marlon Morat</i>		Building Inspector		DATE 11-14-02	

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REGISTER OWNER(S): MCCUAN, ERIC P. & KRISTINA L.

LEGAL OWNER: WASHINGTON MUTUAL BANK

MANUFACTURED HOME: 1999 SKYLI 66 X 28, VIN# 21910418MAB

6 SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
WASHINGTON MUTUAL BANK					
Signature of Legal Owner and Title, IF APPLICABLE					
BY: LINDA CORDI					
Signature of Additional Legal Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on 10-1-02	
		County of Clark		Signature Stephanie Smith	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
		by May 17 2003		PRINTED NAME OF NOTARY	
Title Loan Cordi		AND: County Office No. 607		Dealer No. 888	
DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date		5-17-03	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's)					
A tract of land in the South half of the Southeast quarter of Section 30, Township 2 North, Range 5 East of the Willamette Meridian, Skamania County, Washington, described as follows:					
Lot 4 of ROBSON SHORT PLATS, recorded in Book "3" of SHORT PLATS, page 292, records of Skamania County, Washington.					
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			
<input type="checkbox"/> 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		
Angela Moser			30-01-08		
SIGNATURE			DATE		
Angela Moser			11-14-02		
10 TITLE FEES					
FLUNG 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 TTY (360) 664-8885.