

148769

BOOK 242 PAGE 670

FILED
SKAMIA
BY CLARK COUNTY TITLE

MAY 15 11 40 AM '03

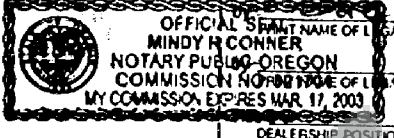
AMOSER
J. MICHAEL DAWSON

RETURN ADDRESS

CLARK COUNTY TITLE COMPANY
1507 B NE 78TH ST #100
1400 Washington Street #100
Vancouver, WA 98660 98665
Attn.: Maxine L. Duff
CCT 80690MD

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	YEAR	MAKE	LENGTH/WIDTH/FEET	VEHICLE IDENTIFICATION NUMBER (VIN)	
	1999	GUERDON	64 X 40	GDSTOR-3998-20449	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 01-05-06-4-0-0500-00					
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
1		Short Plat 3-66			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
Skamania	2		1		
NAME OF REGISTERED OWNER					
REISINGER, JERRY					
NAME OF ADDITIONAL REGISTERED OWNER					
REISINGER, CINDY					
ADDRESS					
2712 Belle Center Road		CITY	Washougal	STATE	ZIP CODE
				WA	98671
NAME OF LEGAL OWNER					
WELLS FARGO HOME MORTGAGE, INC.					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
800 LaSalle Avenue #1000		CITY	Minneapolis	STATE	ZIP CODE
				MN	55402
GRANTEE					
NAME					
The Public STATE OF WASHINGTON, DEPARTMENT OF LICENSING					
DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I AM AWARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE <i>Jerry Reisinger</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Cindy Reisinger</i>					
NOTARY SEAL OR STAMP					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of Clark Signed or attested before me on 12/6/02 Signature <i>Maxine L. Duff</i> NOTARY OR AGENT Maxine L. Duff PRINTED NAME OF NOTARY AND: County Office No. OR Dealer No. OR 6-9-03 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: <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)					
BLOG PERMIT OFFICE/PHONE #		BLOG PERMIT #			
509-422-9484		11200			
SIGNATURE / POSITION					
DATE					
5-9-03					

BOOK 242 PAGE 671

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 <u>Wells Fargo Home Mortgage</u> <u>Sue Ward, closer</u>					
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 <u>Clackamas</u>		Signed or attested before me on <u>12-13-02</u>	
		Signature <u>Sue Ward</u>		Signature <u>Mindy H. Conner</u>	
		NOTARY OR AGENT		NOTARY OR AGENT	
		PRINTED NAME OF NOTARY <u>Mindy H. Conner</u>		PRINTED NAME OF NOTARY <u>Mindy H. Conner</u>	
DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR <u>3/17/03</u>		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)					
Lot 1 of GADBAW SHORT PLATS, recorded in Book "3" of SHORT PLATS, Page 66, records of Skemania 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) <u>Angela Moser</u>			COUNTY OFFICE/YES OPERATOR NUMBER <u>30-01-08</u>		
SIGNATURE <u>Angela Moser</u>			DATE <u>5-9-03</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.					

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.