149049

BOOK 244 PAGE 29

Bob Quoss

RETURN ADDRESS
Robert / Kerma Quoss
PO Box 587
Carson Wash 98610

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/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
F125188	1997	Gold E	66X27	G-WDF23N18140

2 LAND LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

REAL PROPERTY TAX PARCEL NUMBER: 3-8-28-2-2-301

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
1		Dahl Short Plat	

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
30	2	2

NAME OF REGISTERED OWNER: Robert D Quoss

NAME OF ADDITIONAL REGISTERED OWNER: Kerma G Quoss

ADDRESS / CITY / STATE / ZIP CODE: Po Box 587 131 Smith Becker Rd Carson WA 98610

NAME OF LEGAL OWNER: Robert D Quoss

NAME OF ADDITIONAL LEGAL OWNER: Kerma G Quoss

ADDRESS / CITY / STATE / ZIP CODE: PO Box 587 131 Smith Becker Rd Carson WA 98610

GRANTEE

NAME: State of WA Dept 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 D Quoss

Signature of Additional Registered Owner and Title, IF APPLICABLE: Kerma G Quoss

NOTARY SEAL OR STAMP: DONNA A. RUSH NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXP. 8-15-2003

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skamania

Signed or attested before me on June 9, 2003

by Robert D Quoss (PRINT NAME OF REGISTERED OWNER)

Signature: Donna Rush (NOTARY OR AGENT)

by Kerma G Quoss (PRINT NAME OF REGISTERED OWNER)

DONNA RUSH (PRINTED NAME OF NOTARY)

Title

AND: County Office No. OR Dealer No. OR 8-15-03 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:
☒ 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	40*97

SIGNATURE / POSITION: Marlon Morat, Building Inspector DATE: 6-11-03

TD-420-729 MANUF HOME APPL (R8/98) DA Page 1 of 2

Unofficial Copy

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 Parcel of Land situated in the N.W. quarter of the N.W quarter of Sec 28 township 3 North, Range 8 East of Willamette Medians SKAMANIA County WA.
Discribe As Follows
Lot 1 of the Alice A Dall short plat As Recorded in The Book 2 of short Plats on page 81. SKAMANIA County Record's

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).

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/I'S OPERATOR NUMBER
Angela Moser	30-01-08

SIGNATURE	DATE
Angela Moser 3B	6-12-03

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.