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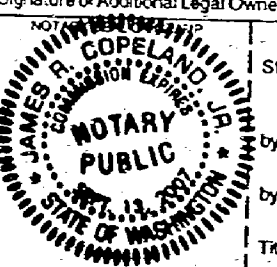
WASHINGTON CO. TITAN

RETURN ADDRESS

C. M. W. S. J.
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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)				☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH, FEET	VEHICLE IDENTIFICATION NUMBER	
	2002	Suncrest	56 X 40	WAFL231A17712-S	
2 LAND					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 03-07-36-1-4-0300-001					
LOT	BLOCK	PLAT NAME	SECTION / TOWNSHIP / RANGE		
1 & 2		Doucette			
3 GRANTOR(S) REGISTERED LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
30		2		1	
NAME OF REGISTERED OWNER					
Calvin Beard					
NAME OF ADDITIONAL REGISTERED OWNER					
Robin Beard					
ADDRESS		CITY	STATE	ZIP CODE	
PO Box 769		Carson	WA	98610	
NAME OF LEGAL OWNER					
Riverview Community Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
PO Box 1068		Camas	WA	98607	
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					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		County of		Signed or attested before me on	
by		PRINT NAME OF REGISTERED OWNER		Signature	
by		PRINT NAME OF REGISTERED OWNER		Signature	
Title		DEALERSHIP POSITION / AGENT / NOTARY		AND: County / Office No. OR Dealer No. OR 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		69-03	
SIGNATURE / POSITION		DATE		DATE	
Marlon Morat, Building Inspector		8-22-03			

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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>Kathy McKenney</i>	
Signature of Additional Legal Owner and Title, IF APPLICABLE _____	
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <i>Skamania</i> Signed or attested before me on <i>8-28-07</i> by _____ Signature <i>[Signature]</i> PRINT NAME OF LEGAL OWNER by _____ Signature <i>James R. Copeland JR</i> PRINT NAME OF NOTARY Title _____ AND: County/Office No. OR <i>9-11-07</i> DEALERSHIP POSITION/AGENT/NOTARY 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 Northwest Quarter of the Southeast Quarter of Section 36, Township 3 North, Range 7 East of the Willamette Meridian in the County of Skamania, State of Washington, described as follows: Lot 1 and 2 Doucette Short Plat recorded in Book 3 of Short Plats, Page 310 of 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) _____ 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) <i>Angela Moser</i> COUNTY OFFICE/VS OPERATOR NUMBER <i>30-01-08</i>	
SIGNATURE <i>Angela Moser</i> DATE <i>8-27-07</i>	
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) 564-8885.