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BOOK 255 PAGE 263

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1 SKAMANIA CO. 11/11/03

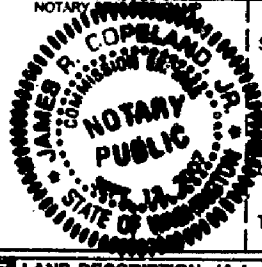
RETURN ADDRESS

Dec 8 1 21 PM '03

J. HIGGINS

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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) | | | | <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) | |
| Z109008 | 1995 | FLTRD | 40 X 60 | ORFLR48AB19227LP | |
| 2 LAND | | | | | |
| LEGAL DESCRIPTION ON PAGE 2 | | | | | |
| MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED | | | | | |
| LOT | BLOCK | PLAT NAME OR SECTION/TOWNSHIP/RANGE | | REAL PROPERTY TAX PARCEL NUMBER | |
| 1 | | Evergreen Park | | 03-09-14-2-0-1 | |
| 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) | | | | | |
| COUNTY NUMBER | NUMBER OF REGISTERED OWNERS | | NUMBER OF REGISTERED OWNERS | | |
| 30 | 2 | | 2 | | |
| NAME OF REGISTERED OWNER | | | | | |
| Gary L. Manning | | | | | |
| NAME OF ADDITIONAL REGISTERED OWNER | | | | | |
| Jessica R. Manning | | | | | |
| ADDRESS | | | | | |
| PO Box 931 | | | | | |
| CITY | | | | | |
| White Salmon | | | | | |
| STATE | | | | | |
| WA | | | | | |
| ZIP CODE | | | | | |
| 98672 | | | | | |
| NAME OF LEGAL OWNER | | | | | |
| Riverview Community Bank | | | | | |
| NAME OF ADDITIONAL LEGAL OWNER | | | | | |
| ADDRESS | | | | | |
| PO Box 1068 | | | | | |
| CITY | | | | | |
| Camas | | | | | |
| STATE | | | | | |
| WA | | | | | |
| ZIP CODE | | | | | |
| 98607 | | | | | |
| 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 Skamania | | | | | |
| Signed or attested before me on 11/26/03 | | | | | |
| by Gary L. Manning | | | | | |
| PRINT NAME OF REGISTERED OWNER | | | | | |
| by Jessica R. Manning | | | | | |
| PRINT NAME OF REGISTERED OWNER | | | | | |
| Title Notary | | | | | |
| DEALERSHIP POSITION/AGENT/NOTARY | | | | | |
| AND: County/Office No. OR | | | | | |
| Dealer No. OR | | | | | |
| Notary Expiration Date 7-17-2006 | | | | | |
| 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) | | | | | |
| BLDG PERMIT OFFICE/PHONE # | | | | | |
| BLDG PERMIT # | | | | | |
| SIGNATURE / POSITION | | | | | |
| DATE | | | | | |

| | | | | | |
|---|---------------------------|--|-----------------------------------|-------------------------------------|------------------|
| MANUFACTURED HOME - FROM SECTION 1 | | | | | |
| TPO / PLATE NUMBER | YEAR | MAKE | LENGTH X WIDTH (FEET) | VEHICLE IDENTIFICATION NUMBER (VIN) | |
| | | | X | | |
| 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>Paul L. M. George & B. M. George</u> | | | | | |
| Signature of Additional Legal Owner and Title, IF APPLICABLE _____ | | | | | |
|  | | NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington County of <u>Skamania</u> Signed or attested before me on <u>December 1, 2007</u> Signature <u>[Signature]</u> PRINT NAME OF LEGAL OWNER _____ PRINT NAME OF LEGAL OWNER _____ Title <u>No Long</u> DEALERSHIP POSITION/AGENT/NOTARY _____ PRINTED NAME OF NOTARY <u>James R. Copeland JR</u> AND: County/Office No. OR _____ Dealer No. OR _____ Notary Expiration Date <u>9-13-07</u> | | | |
| 7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office) | | | | | |
| A part of Lot 3 Oregon Lumber Company Subdivision, according to the recorded plat thereof recorded in Book 'A' of Plats, Page 29, in Section 14, Township 3 North, Range 9 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows: Lot 1 of the Evergreen Park Short Plat, recorded in Book 3 of Short Plats, Page 121, 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 | | | |
| <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 | | |
| SIGNATURE | | | DATE | | |
| 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 TTY (360) 664-8885.