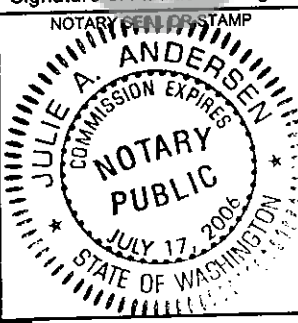



RETURN ADDRESS

STATE OF WASHINGTON Department of <b>Licensing</b>		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			
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	05	Beacon	56.5 X 27	ORFL448A30164-BH13	
<b>2 LAND</b>					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				LEGAL DESCRIPTION ON PAGE 2	
				REAL PROPERTY TAX PARCEL NUMBER 03-08-17-2-3-0404-00	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
4		Russell's Meadow Sub			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
30		1		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Clara Belle Tye					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
PO Box 395		Stevenson	WA	98648	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
First Mutual Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
400 108th Avenue, NE #301		Bellevue	WA	98004	
<b>GRANTEE</b>					
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 <u>Clara Belle Tye</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <u>Skamania</u> Signed or attested before me on <u>8/27/04</u>			
		by <u>Clara Belle Tye</u> PRINT NAME OF REGISTERED OWNER		Signature <u>Julie A. Andersen</u> NOTARY OR AGENT	
		by _____ PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY <u>Julie A. Andersen</u>	
		Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: Country/Office No. OR Dealer No. OR <u>7/17/2006</u> Notary Expiration Date	
<b>4 TITLE COMPANY CERTIFICATION</b>					
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.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
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 #	
Marlon Morat		509-427-9484		192-04	
SIGNATURE / POSITION				DATE	
<u>Marlon Morat</u>		Building Inspector		10-21-04	

FILL IN AND  
SIGNATURE  
BY

OCT 26 1 55 PM '04

J. MICHAEL NELSON

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
			X		
<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE			CHERIL L. KING, A.V.P.		
Signature of Additional Legal Owner and Title, IF APPLICABLE					
		<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>			
State of Washington		County of KING		Signed or attested before me on 9/2/04	
by FIRST MUTUAL BANK		Signature		Betsy J. Nelson	
PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT			
by CHERIL L. KING, A.V.P.		PRINTED NAME OF NOTARY		Betsy J. Nelson	
PRINT NAME OF LEGAL OWNER		County/Office No. OR		AND: Dealer No. OR	
Title Notary		Notary Expiration Date 04/30/08			
DEALERSHIP POSITION/AGENT/NOTARY					
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
Lot 4 of the Russell's Meadow Subdivision, according to the recorded Plat thereof, recorded in Book 'B' of Plats, Page 102, in the County of Skamania, State of Washington.					
Together with Each lot shown above having an undivided 1/31 interest in the Pond known as Lots 2 and 3 of the Russell's Meadow Subdivision, according to the recorded plat thereof, recorded in Book B of Plats, Page 102, in the County of Skamania, State of Washington.					
<b>8 DEALER'S REPORT OF SALE</b>					
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"/> <b>USE TAX EXEMPT</b> Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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		10-26-04			
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<b>IMPORTANT:</b> 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.					
<b>APPLICANTS:</b> 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.