

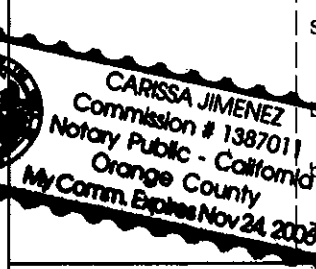
Doc # 2005155832
Page 1 of 3
Date: 01/06/2005 10:51A
Filed by: CLARK COUNTY TITLE
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$21.00

RETURN ADDRESS

CLARK COUNTY TITLE
1503 NE 78th STREET #12

VANCOUVER, WA 98665
attn: JAN #97848

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input type="checkbox"/> TITLE ELIMINATION	
				<input checked="" type="checkbox"/> TRANSFER IN LOCATION	
				<input type="checkbox"/> 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)	
%75020	1983	PRESG	40 X28	7618	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 02 05 20 0 0 0609 00					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
		Lot 3 WHITAKER #1 Bk 2/Pg 209			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
SKAMANIA		two		one	
NAME OF REGISTERED OWNER					
VINCE F. BROWN					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL REGISTERED OWNER					
MELANIE J. BROWN					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS					
441 MATHEWS		CITY WASHOUGAL		STATE WA ZIP CODE 98671	
NAME OF LEGAL OWNER					
ARGENT MORTGAGE COMPANY LLC					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL LEGAL OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS					
2603 MAIN STREET		CITY IRVINE		STATE CA ZIP CODE 92614	
GRANTEE					
NAME					
STATE OF WASHINGTON 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					
NOTARY SEAL OR STAMP					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of CLARK Signed or attested before me on 12/14/04					
by VINCE F. BROWN Signature					
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT					
by MELANIE J. BROWN JAN SOUTHARD					
PRINT NAME OF REGISTERED OWNER					
Title NOTARY AND: County/Office No. OR 10/10/06					
DEALERSHIP POSITION/AGENT/NOTARY 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					
JAN SOUTHARD CLARK COUNTY TITLE COMPANY 360 573 4700					
SIGNATURE / POSITION DATE					
JAN SOUTHARD ESCROWWORKER 12-21-04					
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 #					
Marlon Morat 509-422-9484 263-03					
SIGNATURE / POSITION DATE					
Marlon Morat Building Inspector 12-14-04					

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
%75020	1983	PRESG	40 X 28	7618	
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>ARGENT MORTGAGE COMPANY LLC</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington CALIFORNIA		Signed or attested before me on 12-16-04	
		County of Orange		Signature <i>[Signature]</i>	
		PRINT NAME OF LEGAL OWNER Krista Gerardo		PRINTED NAME OF NOTARY Carissa Jimenez	
		PRINT NAME OF LEGAL OWNER Mary		COUNTY/OFFICE NO. OR DEALER NO. OR NOTARY EXPIRATION DATE 11-21-06	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
FOR LEGAL DESCRIPTION SEE EXHIBIT "A" ATTACHED AND BY THIS REFERENCE MADE A PART HERETO.					
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) Angela Moser			COUNTY OFFICE/VFS OPERATOR NUMBER 30-01-08		
SIGNATURE <i>[Signature]</i>			DATE 12-28-04		
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.

Exhibit A

A parcel of property located in the Northwest quarter of the Southeast quarter of the Northwest quarter of Section 20, Township 2 North, Range 5 East of the Willamette Meridian, Skamania County, Washington, described as follows:

The North half of Tracks 3 and 4 of that Short Plat recorded in Book 2 of Short Plats, page 209, Skamania County Records , plus an exclusive easement for ingress, egress and utilities running across and over the Westerly 30 feet of newly created Lot 4 (formerly Tract 3)

ALSO TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over the West 60 feet of the Southwest quarter of the Southwest quarter of the Northwest quarter of Section 20, Township 2 North, Range 5 East of the Willamette Meridian, Skamania County, Washington.

ALSO a non-exclusive easement for ingress, egress and utilities 60 feet in width, the centerline being the North boundary of the South half of the South half of the Northwest quarter of Section 20, Township 2 North, Range 5 East of the Willamette Meridian, Skamania County, Washington, excepting the East 660 feet thereof.