## Chicago Title Insurance Company 10000 NE 7th Avenue, Suite 400 Vancouver, WA 98685

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Date: 03/28/2005 02:21P

Filed by: CHICAGO TITLE INSURANCE CO

Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$20.00

STATE OF WASHING Department of LICENS  Anyone who knowled a felony, and up	<b>SING</b> Ingly makes a fa	AP	CTURED H PLICATION  a material fact is gu by a fine, imprisonn	☐TRANSF	LEASE CHECK ONE LIMINATION ER IN LOCATION AL FROM REAL PROPERTY 12.210)
MANUFACTUR	EDHOME				
TPO / PLATE NUMBER	YEAR	MAKE		VEHICLE IDENTIFICATION N	
&225748	2001	GLDNW	56 <b>X</b> 27	GWOR23N24884  DESCRIPTION ON PA	
2 LAND	<u> </u>			REAL PROPERTY TAX PA 02-05-30-0-	
MANUFACTURED	HOME WILL BE	<b>→ AFFIXED</b>	REMOVED		
LOT	BLOCK	PLAT NAME		allia.	CTION/TOWNSHIP/RANGE
GRANTOR(S)	REGISTERED/I	EGAL OWNER(S	a) ADDIT	TONAL NAMES ON PA	<u> 1/4 Sec.300T0NRSE</u> GE
COUNTY NUMBER	TEGIO I ENEDIE		F REGISTERED OWNERS		LEGAL OWNERS
			2		
NAME OF REGISTERED	•				
Lee R. Lup	fer REGISTERED OWNE	Я	<del>/ \                                   </del>		
Judy K. Lu					
ADDRESS			CITY	-	STATE ZIP CODE
902 Alder	Road		Washougal.		WA 98671
LoanCity.c			P .		
NAME OF ADDITIONAL L			1 .		
DDRESS			CITY	4/	STATE ZIP CODE
5000 SW Me	adows		Lake Oswego	0	R 97035
GRANTEE NAME				$\rightarrow$	
VEHICLE AND THIS  Signature  Signature of Addition	TIEST UNDER SINFORMATIO e of Registered Conal Registered C	Owner and Title, IF	APPLICABLE X	Les B Ly	Lupler
NOTARY SEAL OR	STAMP	NOTARIZA	TION/CERTIFICATION	1.3	OWNER(S) SIGNATURE
	Sta	ate of Washington County of		Signed or a	melon 6/48/2003
RYLEE A MIRC	OVICH	Lee R. I		( hu	rivoe Umrunil
TARY PUB		Judy K.	Lupfer GISTERED OWNER	Signaturé NOTA	RY OR AGENT
TE OF WASHING					A. Mircovich
MMISSION EXF		PRINT NAME OF RE	GISTERED OWNER	PRINTED NAME O	unty/Office No. OR
ANUARY 19, 2	006 Tit	le Nota	ITY ION/AGENT/NOTARY	AND:	Dealer No. OR1/19/2006 tary Expiration Date
1 TITLE COMPA	NY CERTIFICAT	ION	<u> </u>		
certify that the lega	al description of t	he land and owne	rship is true and corre	ct per the real property r	ecords.
NAME (TYPED OR PRIN	(ED)		TITLE	COMPANY / PHONE NUMBE	н
					DATE
SIGNATURE / POSITION					
				A Alb Alaska Tiblia Alama	
			thin 10 calendar day	s of the date Title Com	pany Representative signs.
Finalize this applic	RMITOFFICE CE	RTIFICATION			pany Hepresentative signs.
Finalize this applic	MIT OFFICE CE	RTIFICATION ctured home has t ermit has been iss	een affixed to the rea	property as described. Ind the attachment will b	e inspected upon completion.

J. MICHA CHURTHOON

6 SIGNATURE OF LEG	SAL OWNED					
	OWNER INDICATES CONSENT I	FOR ELIMINATION	OFTITLE/REMONTAN	ROM REAL PROPERTY		
l .	Owner and Title, IF APPLICABL	1	uy Ru	hl		
Signature of Additional Le	egal Owner and Title, IF APPLICABL	LE	/	_		
NOTARY SEAL STO			FOR LEGAL OWNER(S	SIGNATURE		
	State of Washington		Signed or attested			
	County of	ACUAMA	before me on	<u> </u>		
	by Tracy Ri PRINT NAME OF LEGAL OWN		Signature NOT RY OR A	Moceum		
	by		LAUR	oppison		
	NICHOLOGIA	NEH		fice No. OR . In all A		
	Title NOTOLY OF DEALERSHIP POSITION/AGE	NT/NOTARY		aler No. OR 1 1 20 (0 ) iration Date		
7 END DESCRIPTION	N (A legal description of the land o	can be obtained fro	m the local County Ass	essor's Office		
The North	h 328 80 foot (mongre	od along the	West ins of	the Couthroom		
	h 328.89 feet (measur of Section 30) of the					
Section 3	30, Township 2 North,	Range 5 Eas	t of the Willar			
Meridian,	, Skamania County, St	ate of Washi	ngton.	- 1		
		. "				
			-			
		7				
8 DEALER'S REPORT	OFSALE	<del></del>				
	INFORMATION IS CORRECT. THI		R OF ENCUMBRANCES	EXCEPT AS SHOWN.		
DEALER NAME (TYPED OR PRI			A DEALER NUMBER	DATE OF SALE		
PURCHASE PRICE	TAX JURISDICTION/TAX RATE DEALER	R'S AUTHORIZED SIGNAT	TURE			
	IPT Sale to a Certified Tribal member			nt of delivery).		
	GENT LICENSING OFFICE APPFication appears to have been complete			umantation to proposed with		
the recording of this form.	cation appears to have been complete	ed correctly, and the a	ppiicantnas sunicientooc	currientation to proceed with		
NAME TYPED OR PRINTED)	11-20	Co	OUNTY OFFICENES OPERATO	OR NUMBER		
SIGNATURE SIGNATURE	Moser		<u>80-01-0</u>	DATE		
V Chia o Oa	Nore			3-28-05		
10 TITLE FEES	110-05			0 200		
FILING FEE APP	PLICATION MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES		
				TOTAL FEES & TAX		
	Once the application has been					
	Licensing Office, take your app Retain proof of the recording fe					
	your original application form, or					
APPLICA	NTS: Once recorded, you m	ust return to a Ve	hicle Licensina office	to file the		
Manufactured Home Application, paying all required fees. Vehicle						
<u> </u>	licensing subagents ch	narge a service fee	<del> </del>			
For full instru	actions on completing this form	for Title Elimination	on, Removal from Rea	ıl Property		
or Transfer ir	n Location, see form TD-420-73	30, Manufactured	Home Application Ins	tructions.		