

RETURN ADDRESS

Doc # 2005159705
Page 1 of 3
Date: 11/30/2005 03:08P
Filed by: JAMES C BAXTER
Filed & Recorded in Official Records
of SKAMANIA COUNTY
J. MICHAEL GARVISON
AUDITOR
Fee: \$34.00

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 8096371		YEAR 1996	MAKE PALMH	LENGTH/WIDTH(FEET) 48X28	VEHICLE IDENTIFICATION NUMBER (VIN) PH200626AB
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 2-7-20-34-2700-06	
LOT 27	BLOCK 8	PLAT NAME OR SECTION/TOWNSHIP/RANGE Relocated North Bonneville		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER 30		NUMBER OF REGISTERED OWNERS 3		NUMBER OF LEGAL OWNERS	
NAME OF REGISTERED OWNER Baxter, James C		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL REGISTERED OWNER Baxter, Robert L		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS PO Box 440		CITY N. Bonneville	STATE WA	ZIP CODE 98639	
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS		CITY	STATE	ZIP CODE	
GRANTEE					
NAME State of WA, Dept 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 James C Baxter					
Signature of Additional Registered Owner and Title, IF APPLICABLE Robert L Baxter					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Skamania Signed or attested before me on 10-28-05			
		by James C. Baxter PRINT NAME OF REGISTERED OWNER Signature Michael Nose NOTARY OR AGENT			
		by Robert Baxter PRINT NAME OF REGISTERED OWNER Title Agent PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR AND: Notary Expiration Date 30-01-08			
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) David Nail		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
SIGNATURE / POSITION City Building Inspector		DATE 10/28/05			

MANUFACTURED HOME - FROM SECTION 1

TPO / PLATE NUMBER 6096371	YEAR 1996	MAKE PALMH	LENGTH/WIDTH(FEET) 48X28	VEHICLE IDENTIFICATION NUMBER (VIN) PH200626AB
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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 _____

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington	Signed or attested
	County of _____	before me on _____
	by _____ PRINT NAME OF LEGAL OWNER	Signature _____ NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY _____
Title _____ DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR 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)

See page 3

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) <i>Angela Moser</i>	COUNTY OFFICE/VFS OPERATOR NUMBER <i>30-01-08</i>
SIGNATURE <i>Angela Moser</i>	DATE <i>11-30-08</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 TTY (360) 664-8885.



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT
LEGAL DESCRIPTION OF LAND

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check type of application:

- ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

Land:

Property Tax Parcel Number 0207-20-3-4-2700-00

Legal Description:

Lot 27, Block 8, Plat of Relocated North Bonnevile,
Recorded in BK 8 of plats, Pg 16 Skamania County
File No. 83466 Also recorded in BK B of plats, Pg 32,
Skamania County File No. 84429, records of Skamania
County, Washington

SUBJECT TO:

Reserving to the United States of America the right
to grant Easements to public utilities to erect,
construct, operate and maintain public utilities
facilities on, over and under the utility easement(s)
if any, as shown on the said recorded plats.

Along with MH
Lic # 24096371
VIN PH200226AB