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Date: 07/24/2006 04:27P

Filed by: MARK & CINDY LUX

Filed & Recorded in Official Records
of SKAMANIA COUNTY

J. MICHAEL GARVISON

AUDITOR

Fee: \$33.00

RETURN ADDRESS

Mark & Conoy Ly	X
PO BOX 118	
Carson WA 98	610

	<del></del>	PLEASE CHECK ONE
STATE OF WASHINGTON Department of	MANUFACTURED HOME	
licensing	APPLICATION	☐TITLE ELIMINATION  '☑TRANSFER IN LOCATION
		REMOVAL FROM REAL PROPERTY
Anyone who knowingly makes a	false statement of a material fact is guilty may be punished by a fine, imprisonment,	,
	may be pulled by a fine, imprisonment,	or Boam (New Yorks)
1 MANUFACTURED HOME	T	DENTIFICATION NUMBER AND
TPO/PLATE NUMBER YEAR 1002		EIDENTIFICATION NUMBER (VIN)
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2 LAND From 03073514	1.0	
MANUFACTURED HOME WILL B	E X AFFIXED X REMOVED ()	PROPERTY TAX PARCEL NUMBER O
LOT 7 BLOCK	PLATNAME OR SECTION TOWNSHIP/RANGE	6 19 NW 45W 4 Section
3 GRANTOR(S) REGISTERED/	LEGAL OWNER(S) ADDITIONAL	1 1 20 2
GRANTOR(S) REGISTERED/I	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
<b>ご</b> ろり	2.	· ·
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
I work L	mx .	
NAME OF ADDITIONAL REGISTERED OWNE	R	DOL CUSTOMER ACCOUNT NUMBER
L Cansa	Lux.	
ADDRESS DO BOX 1	S COITY	STATE ZIP CODE
NAME OF LEGAL OWNER	0001 501	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
ADDRESS	CITY	STATE ZIP CODE
ADDAESS	···	4 1
GRANTEE		
NAME ( )	1 1 0 1 0 1	
State of (1)	ashington Deltol ice	15(10 X
I DO SOLEMNLY ATTEST UNDE		ARE THE REGISTERED OWNER(S) OF THIS
VEHICLE AND THIS INFORMATION	ON IS ACCURATE:	
Signature of Registered (	Owner and Title, IF APPLICABLE	Ma Jul
	/ 0	Y1/2.
Signature of Additional Registered		Mus J
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR	RÉGISTERED/OWNER(S) SIGNATURE
Si	tate of Washington Countries Sharvasta	Signed or attested 7-3406
;		
<u>*</u>   b\	WINK WINK	Signature Machine
~,	PRINT NAME OF REGISTERED OWNER	NOTARY OR AGENT
by	( Class August )	
	PRINT-MAME OF HACKSTERED OWNER	PRINTED NAME OF NOTARY  County/Office No. OR RAME OF NOTARY
	tle <u>Charrie</u>	AND: Dealer No. OR OO O(C)
A TITLE COMPANY OF PTICO	DEALERSHIP POSITION/AGENT/NOTARY	Notary Expiration Date
4 TITLE COMPANY CERTIFICA	f the land and ownership is true and correct pe	er the real property records.
NAME (TYPED OR PRINTED)		NY BHONE NUMBER
Jim Spel AN	1) SKAMANIA (	Junto 1846 427-5681
SIGNATURE POSITION		DATE
chim all	Wer	7-24-06
Finalize this apprication with a Li	censing Agent within 10 calendar days of th	e date Title Company Representative signs.
5 BUILDING PERMIT OFFICE C		
I certify that: the manufa	ctured home has been affixed to the real prop permit has been issued for this purpose and th	erty as described. e attachment will be inspected upon completion.
NAME (TYPED OR PRINTED)	BLDG PERMIT OFFICE/PHONE #	BLDG PERMIT #
Marlon Morat	509-427-3920	114-06
Marlen Mod	& Building Inspe	rotor 7-18-06

MANUFACTURED H						
TPO/PLATE NUMBER	YEAR	MAKE /	LENGTH/WIDTH(FEET)			VIN)
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6 SIGNATURE OF L	EGAL OWN	ER	2 0			
SIGNATURE OF LEGA	AL OWNER	INDICATES CONS	ENT FOR ELIMINA	TION OF TIT	TE / REMOVAL E	ROM REAL PROPERTY.
				11011 01 111	LE / HEMOVAL I	HOW HEAL PROPERTY.
Signature of	Legal Owner	and Title, IF APPL	ICABLE			9.
Signature of	Logal Omio	wii 1110, 11 71 1 E	210/1DLL			
Signature of Additional	Legal Owner	and Title. IF APPL	ICABLE			
NOTARY SEAL OR STA			ATION/CERTIFICA	TION FOR L	ECAL OWNER/6	CIONATURE
				TION FOR E	EGAL OWNER(S	SIGNATURE
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	l <sub>Tit</sub>		- A -			fice No. OR aler No. OR
		DEALERSHIP POSITION	ON/AGENT/NOTARY			iration Date
7 LAND DESCRIPTI	ON (A lega	description of	the land can be o	btained from	n the local Count	ty Assessor's Office)
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