


RETURN ADDRESS

STATE OF WASHINGTON Department of <b>Licensing</b>		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION	
				<input 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)					
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
\$61040	1979	HILLC	60 X 24	02910704M	
<b>2 LAND</b>					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 02-07-20-3-4-2600-00					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
26	8	PLAT OF RELOCATED NORTH BONNEVILLE			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
NAME OF REGISTERED OWNER					
Byron Babcock					
NAME OF ADDITIONAL REGISTERED OWNER					
Terrie Babcock					
ADDRESS		CITY	STATE	ZIP CODE	
PO BOX 93		North Bonneville	WA	98639	
NAME OF LEGAL OWNER					
America's Wholesale Lender					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
8305 SW Creekside Pl., Ste B		Beaverton	OR	97008	
<b>GRANTEE</b>					
NAME					
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			
JULIE ANDERSEN COMMISSION EXPIRES JUNE 17, 2010 NOTARY PUBLIC STATE OF WASHINGTON		State of Washington County of Skamania Signed or attested before me on 9/19/06 by Byron Babcock PRINT NAME OF REGISTERED OWNER Signature Julie Andersen NOTARY OR AGENT by Terrie Babcock PRINT NAME OF REGISTERED OWNER Printed Name of Notary Julie Andersen Title Notary AND: County/Office No. OR Dealer No. OR 06/17/2006 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 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 #	
DAVID NAIL		509427-8182			
SIGNATURE / POSITION		DATE			
David Nail		9/15/06			

<b>MANUFACTURED HOME - FROM SECTION 1</b>					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
			<b>X</b>		
<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 <u>Manufactured Home (Consenting Spouse)</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE <u>Mary L Meacham</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
 <b>OFFICIAL SEAL</b> <b>MARY L MEACHAM</b> NOTARY PUBLIC-OREGON COMMISSION NO. 399168 MY COMMISSION EXPIRES NOVEMBER 3, 2009		State of <u>Oregon</u>		Signed or attested before me on <u>August 11, 2006</u>	
		County of <u>WASHINGTON</u>			
		by <u>THERESA L. Copeland</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by		PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY	
Title <u>Notary</u>		AND: <u>MARY MEACHAM</u>		County/Office No. OR <u>WASHINGTON</u>	
DEALERSHIP POSITION <u>AGENT/NOTARY</u>		Dealer No. OR		Notary Expiration Date <u>11-03-2009</u>	
<b>7 LAND DESCRIPTION</b> (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 26, Block 8, Plat of Relocated North Bonneville recorded in Book B of Plats, Page 16, under Skamania County File No. 83466 also recorded in Book B of Plats, Page 32, under Skamania County File No. 84429, records of Skamania County, 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		
<u>Angela Moser</u>			<u>30-01-08</u>		
SIGNATURE			DATE		
<u>Angela Moser</u>			<u>9-28-06</u>		
<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.