

Doc # 2006163252  
 Page 1 of 2  
 Date: 10/06/2006 02:33P  
 Filed by: SKAMANIA COUNTY TITLE  
 Filed & Recorded in Official Records  
 of SKAMANIA COUNTY  
 SKAMANIA COUNTY AUDITOR  
 J MICHAEL GARVISON  
 Fee: \$33.00

RETURN ADDRESS

\_\_\_\_\_  
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**STATE OF WASHINGTON**  
 Department of  
**Licensing**

**MANUFACTURED HOME APPLICATION**

**PLEASE CHECK ONE**  
 TITLE ELIMINATION  
 TRANSFER IN LOCATION  
 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)
+390464	1984	Commo	56 X 27	11308

**2 LAND** LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER 01-05-05-0-0-1000-00

LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
4		Moreno Short Plat	

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** ADDITIONAL NAMES ON PAGE \_\_\_\_\_

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
30	2	1

NAME OF REGISTERED OWNER: Duane R. Bires DOL CUSTOMER ACCOUNT NUMBER \_\_\_\_\_  
 NAME OF ADDITIONAL REGISTERED OWNER: Michelle R. Bires DOL CUSTOMER ACCOUNT NUMBER \_\_\_\_\_

ADDRESS: 2781 Canyon Creek Rd Washougal WA 98671 CITY STATE ZIP CODE  
 NAME OF LEGAL OWNER: \_\_\_\_\_ DOL CUSTOMER ACCOUNT NUMBER \_\_\_\_\_  
 NAME OF ADDITIONAL LEGAL OWNER: \_\_\_\_\_ DOL CUSTOMER ACCOUNT NUMBER \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY STATE ZIP CODE

**GRANTEE**  
 NAME: 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: Duane R Bires  
 Signature of Additional Registered Owner and Title, IF APPLICABLE: Michelle R Bires

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**

NOTARY SEAL OR STAMP:

State of Washington County of Skamania Signed or attested before me on 10/2/06

by Duane R Bires Signature Kelly Tennison  
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT  
 by Michelle R Bires Signature Kelly Tennison  
 PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY  
 Title Notary AND: County/Office No. OR Dealer No. OR 112310  
 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 \_\_\_\_\_  
 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:  the manufactured home has been affixed to the real property as described.  
 a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED) Marlon Morat BLDG PERMIT OFFICE/PHONE # 509-427-3920 BLDG PERMIT # 258-00  
 SIGNATURE / POSITION Marlon Morat, Building Inspector DATE 8-23-06

Oct 6 2 15 PM '06

<b>MANUFACTURED HOME - FROM SECTION 1</b>					
TPO / PLATE NUMBER <b>1390464</b>	YEAR <b>84</b>	MAKE <b>Commo</b>	LENGTH/WIDTH(FEET) <b>56X27</b>	VEHICLE IDENTIFICATION NUMBER (VIN) <b>11308</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 _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>				
	State of Washington	SIGNED OR ATTESTED			before me on _____
	County of _____	by _____			Signature _____
		by _____			NOTARY OR AGENT
		by _____			PRINTED NAME OF LEGAL OWNER
		by _____			PRINTED NAME OF LEGAL OWNER
		Title _____			PRINTED NAME OF NOTARY
		DEALERSHIP POSITION/AGENT/NOTARY			AND: County/Office No. OR Dealer No. OR Notary Expiration Date
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
A tract of land in the Southeast Quarter of the Southeast Quarter of Section 5, Township 1 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 4 of the Moreno Short Plat, recorded in Book 3 of Short Plats, Page 304, Skamania County Records.					
<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"/> USE TAX EXEMPT 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) <b>Angela Maser</b>				COUNTY OFFICE/VFS OPERATOR NUMBER <b>80-0108</b>	
SIGNATURE <b>Angela Maser</b>				DATE <b>10-6-06</b>	
<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.