Doc # 2007166700

Page 1 of 3

Date: 06/28/2007 02:52P

Filed by: LAURA FOSTER

Filed & Recorded in Official Records
of SKAMANIA COUNTY

SKAMANIA COUNTY AUDITOR
J MICHAEL GARVISON

Fee: \$34.00

RETURN ADDI	RESS RAA	n. Fos	TER
121	N.W.	LOOP	Rd
Stev	ENSOI	N,WA	98648

			PLEASE CHECK ONE
WASHINGTON STATE BEPARTMENT OF	Manufacture	ed Home	☐TITLE ELIMINATION
WASHINGTON STATE BEPARTMENT OF LICENSING	Applica	tion	TRANSFER IN LOCATION
			REMOVAL FROM REAL PROPERT
Anyone who knowledly make	s a false statement of a mat	erial fact is guilty	
of a felony, and upon convic	tion may be punished by a	ine, imprisonment	, or both. (RCW 46.12.210)
MANUFACTURED HOME			
TPO / PLATE NUMBER YEAR	5 MAPLETTE 42		EIDENTIFICATION NUMBER (VIN)
2 LAND		LEGAL DESC	RIPTION ON PAGE
MANUFACTURED HOME WIL	LBE AFFIXED ARE	WOVED REAL	PROPERTY TAX PARCEL NUMBER
25KA BLOCK	PLAT NAME OR SECTION	TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
3 GRANTOR(S) REGISTERS	D/LEGAL OWNER(S)	ADDITIONAL	NAMES ON PAGE
COUNTY NUMBER	NUMBER OF REGISTS	RED OWNERS	NUMBER OF LEGAL OWNERS
30	/		
NAME OF REGISTERED OWNER	FOSTER		DOL CUSTOMER ACCOUNT NUMBER
LHUKH III			FOSTEL M692QS
NAME OF ADDITIONAL REGISTERED OF		$_{\prime}$	DOL CUSTOMER ACCOUNT NUMBER
ADDRESS 131 NW LOOP NAME OF LEGAL OWNER	Q1	YTK	STATE ZIP CODE
NAME OF LEGAL OWNER	110 516	EVENSON	WA 98648
·	Came	V 7	DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER
ADDRESS			
NO DI NEGO		TY	STATE ZIP CODE
GRANTEE			
State A Was	water Rept of	2 faire	
DO SOLEMNLY ATTEST UND	ER PENALTY OF PERJURY	THAT I / WE AMA	PE THE REGISTERED OWNER(S) OF THIS
EHICLE AND THIS INFORMA	TION IS ACCURATE:		
Signature of Registere	Owner and Title, IF APPLIC	ABLE Sau	raM. Joster
Signature of Additional Registere	d Owner and Title /F ADDUC	ABLE .	
NOTARY SEAL OR STAMP			REGISTERED OWNER(S) SIGNATURE
	State of Washington	THEATION FOR F	Λ
i	County of	malla	Signed or attested Acres 28, 2007
}	Lacem M.	Frotor.	Signature Mach Moscle
<u> </u>	PRINT NAME OF REGISTERED O	WNER	NOTAHY OF AGENT
j'	PRINT NAME OF REGISTERED O	WNER F	PRINTED NAME OF NOTARY
1.	Title. C Sal 1	}	County/Office No. OR
	DEALERSHIP POSITION AGENTA	OTARY	AND: Dealer No. OF
TITLE COMPANY CERTIFIC	ATION		
certify that the legal description	of the land and ownership is to		
AME (TYPED OR PRINTED)	1	TITLE COMPANY	PHONE NUMBER
GNATURE / POSITION		AM AN. A Com	int 18th 509-427-5881
CHNON	<i>{-///</i>		6-28-07
nalize this application with a L	icensing Agent within 10 ca	endar days of the	date Title Company Representative signs.
BUILDING PERMIT OFFICE	CERTIFICATION	auya oi iiia i	napresentative signs.
certify that: If the manuf	actured home has been affixe	d to the real propert	y as described.
ME (TYPED OR PRINTED)		is purpose and the a	attachment will be inspected upon completion. BLOG PERMIT #
211171777			
BNATURE / POSITION			DATE
20-729 (R/6/06) W Page 1 of 2			

MANUFACTURED HO	ME - FROM							
TPO / PLATE NUMBER	YEAR	MAKE	LENGTHWI	OTH(FEET)	AEHICLE IDE	NTIFICATION NUMBE	R (VIV)	
	<u>[</u>		X		e			
6 SIGNATURE OF L	EGAL OWNE	R Kaur	u m	2. 4	star			
SIGNATURE OF LEGA	L OWNER IN	DICATÉS CONSE	ENT FOR EL	IMINATIO	N OF TITLI	E/REMOVAL FR	OM REAL/P	ROPERTY.
·		. -		La	ura	n L	de	
Signature of	Legal Owner a	and Title, IF APP	LICABLE _	0,00	00	1) 10		·
 Signature of Additional	Lagal Owner a	and Title IE ADD	LICABLE					T
NOTARY SEALOR STA	AMP I			DELOA	FION FOR	EGAL OWNER	0) 0101117	1100
TENA						LEGAL OWNER		OKE
300	Stal	te of Washington County of	'SKe	Mal	mi W	Signed or attest before me	ed (o)	28107
S CV MISSION COL	22					. / . /		
NOTARY	h lbv	Laura	JM. t	DSt0	21 Sig	nature	M()	~
	::★雪 ′ '	PRINT NAME OF LEG	AL OWNER		1	NOTARY OR	AGENT	
*: PUBLIC	by				4 4	em c	ari St)\ <u> </u>
103 4W 00 70)	55	PRINT NAME OF LEG	SAL OWNER		PRI	NTED NAME OF NOTA	iay Office No. OR	1 \
TE TO WELL	Title		wy	4		AND: D	ealer No. OR	- エスる用じ
OF WASHIN		DEALERSHIP POSITI					piration Date	
7 LAND DESCRIPTION	ON (A legal d	escription of th	e land can	be obtai	ned from ti	he local County	Assessors	Office)
			47 70					
			4 1		-		- 1	L
		5.44	h. '	7			1	k.
		11	Th			/	1	
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	- T	b. /	7		4	ul I	lk.	- 1
					1	•	1	
8 DEALER'S REPOR	T OF SALE							
I CERTIFY THAT TH	SINFORMAT	ION IS CORREC	T. THE VE	HICLE IS	CLEAR OF	ENCUMBRANC	ES EXCEP	T AS SHOWN
ANY HEQUIRED SA	LES TAX HAS	BEEN COLLE	CTED.	_4		b. 18		
DEALER NAME (TYPED OR FI	RINTED)				WA DEAL	ER NUMBER	DATE OF S	ALE
						# T	V	
PURCHASE PRICE	TAX JURISON	CTION/TAX RATE	DEALER'S AU	THORIZEDS	IGNATURE			
<u> </u>				- 486				
USE TAX EXE	MPT Sale to	a Certified Trib	al member	on the re	servation (attach notarized	statement	of delivery).
COUNTY AUDITOR	AGENT LICE	NSING OFFICE	APPROVA	L: (Not t	or use by	Subagents)		
certify that the above ap							t document	ation to proceed
with the recording of this	form.	71	h-					
NAME (TYPED OR PRINTED)	6000				COUNTY	OFFICE/VFS OPERAT	OR NUMBER	
Muaela	1-1-10	5er				> 0~0<	JJ -	
SIGNATURE	10-						DATE	7. 5
Mag	1 no						62	とひり
O TITLE FEES								
FILING FEE AP	PLICATION	MOBILE HOM	Æ FEE	ELIMINATIO	N FEE	USE TAX	SUBAC	SENT FEES
		1						
						<u> </u>	TOTAL	FEES & TAX
MPORTANT: Onc	e the applica	tion has been	approved	by the C	ounty Aud	itor / Vehicle		
	nsing Office.	take your app	lication for	m to the	County B	ecording Office	L	··· · ·
Reta	ain proof of th	ne recording fe	es paid. If	the Rec	ordina Offi	ce retains	•	
your	original app	lication form, o	btain a ce	rtified co	py of the r	ecorded form.		•
								¬
APPLIC		ce recorded w	ou must re	ent ourse	. Vehicle L	icensing office	to file the	1
ļ								1
Į.	Ma	nufactured Ho	ma Applic	ation, pa	ying all red	quired fees. Vel		
	Ma lice	nufactured Ho ensing subager	me Applicats charge	ation, pa a servic	ying all red e fee.	quired fees. Ve	hicle	_]
For full instr	Ma lice uctions on co	nufactured Ho ensing subager empleting this t	me Applicants charge form for Ti	ation, pa a servio tle Elimir	ying all red e fee. nation, Red		hicle Il Property	or