

RETURN ADDRESS

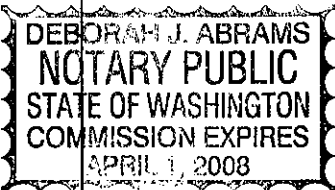
Clark County Title- Hazel Dell Branch

1503 N.E. 78th Street, Suite 12

Vancouver, WA. 98665

Attention: Jan Southard

Phone: 360-573-4700 Fax: 360-573-4978

WASHINGTON STATE 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 +474542	YEAR 2007	MAKE PALHB	LENGTH/WIDTH(FEET) 40 X 68	VEHICLE IDENTIFICATION NUMBER (VIN) PH208954	
2 LAND LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 02-05-32-3-0-0300-00	
LOT 37	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE WASHOUGAL RIVERSIDE TRACTS		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER SKAMANIA		NUMBER OF REGISTERED OWNERS 2		NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER HARNESS, ALAN L				DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL REGISTERED OWNER HARNESS, MARCELLA J				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS 431 LAUREL LN		CITY WASHOUGAL		STATE ZIP CODE WA 98671	
NAME OF LEGAL OWNER COUNTRYWIDE BANK, FSB				DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS PO BOX 10423		CITY VAN NUYS		STATE ZIP CODE CA 91410 0423	
GRANTEE					
NAME THE PUBLIC STATE OF WASHINGTON, 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 <i>Alan L. Harness</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Marcella J. Harness</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of CLARK		Signed or attested before me on 8-27-07	
		by Alan L. Harness		Signature <i>Deborah J. Abrams</i>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Marcella J. Harness		Signature <i>Deborah J. Abrams</i>	
		PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY	
Title Notary		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 4-1-2008			
DEALERSHIP POSITION/AGENT/NOTARY					
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) DEBORAH J ABRAMS		TITLE COMPANY / PHONE NUMBER CLARK COUNTY TITLE CO 360-834-3984			
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) Marlon Morat		BLDG PERMIT OFFICE/PHONE # 509-427-3920		BLDG PERMIT # 896-06	
SIGNATURE / POSITION <i>Marlon Morat, Building Inspector</i>				DATE 10-18-07	



MANUFACTURED HOME - FROM SECTION 1							
TPO / PLATE NUMBER +474542	YEAR 2007	MAKE PALHB	LENGTH/WIDTH(FEET) 40 X 68	VEHICLE IDENTIFICATION NUMBER (VIN) PH208954			
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 <u>Countywide Half FB</u>							
Signature of Additional Legal Owner and Title, IF APPLICABLE <u>Theresa Copeland Fundm Super</u>							
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE					
		State of <u>OREGON</u>		Signed or attested before me on <u>9-19-07</u>			
		County of <u>Washington</u>					
		by <u>Theresa Copeland</u>	Signature <u>Rebecca M. Graves</u>		NOTARY OF AGENT		
		PRINT NAME OF LEGAL OWNER					
		by _____	Signature <u>Rebecca M. Graves</u>		PRINTED NAME OF NOTARY		
PRINT NAME OF LEGAL OWNER							
Title <u>Notary</u>		AND: _____		County/Office No. OR			
DEALERSHIP POSITION/AGENT/NOTARY				Dealer No. OR			
				Notary Expiration Date <u>7-14-09</u>			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)							
LOT 36,37 AND 38, WASHOUGAL RIVERSIDE TRACTS, ACCORDING TO THE PLAT THEREOF, RECORDED IN BOOK "A" OF PLATS, PAGE 80, RECORDS OF SKAMANIA, COUNTY, WASHINGTON							
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)		COUNTY OFFICE/VFS OPERATOR NUMBER					
<u>Angela Moser</u>		<u>30-01-08</u>					
SIGNATURE				DATE			
<u>Angela Moser</u>				<u>10-19-07</u>			
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.							