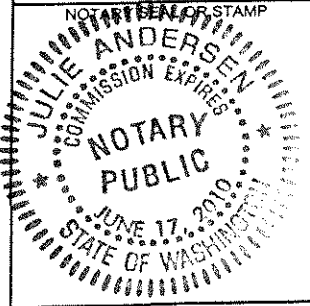


RETURN ADDRESS

Rene & Jody Moreau
PO Box 576
White Salmon, WA 98672

STATE OF WASHINGTON Department of Licensing		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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2008	Woodland Park	44 X 28	ORFL848A32087-WP13	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				LEGAL DESCRIPTION ON PAGE <u>2</u>	
REAL PROPERTY TAX PARCEL NUMBER 03-08-28-2-2-0308-00					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
1		Old Airport Short Plat			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
30		2		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Rene D. Moreau					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Jody L. Moreau					
ADDRESS		CITY		STATE ZIP CODE	
PO Box 576		White Salmon		WA 98672	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
M&T Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE ZIP CODE	
5285 SW Meadows Road, Ste 290		Lake Oswego		OR 97035	
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 <u>Rene D Moreau</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Jody L. Moreau</u>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY SEAL OR STAMP		State of Washington		Signed or attested before me on <u>03/21/08</u>	
		County of <u>Skamania</u>			
		by <u>Rene D. Moreau</u>		Signature <u>Julie Andersen</u>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by <u>Jody L. Moreau</u>		PRINTED NAME OF NOTARY	
		PRINT NAME OF REGISTERED OWNER			
Title <u>Notary</u>		AND: County/Office No. OR <u>6/17/200</u>		Dealer No. OR	
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:					
<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 #	
<u>See Page 4</u>					
SIGNATURE / POSITION				DATE	

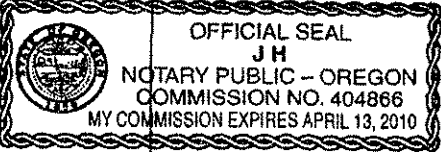
MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
			X		
6 SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington County of _____		Signed or attested before me on _____	
		by _____ PRINT NAME OF LEGAL OWNER		Signature _____ NOTARY OR AGENT	
		by _____ PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR	
		Title _____ DEALERSHIP POSITION/AGENT/NOTARY		AND: Notary Expiration Date _____	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the Northwest Quarter of the Northwest Quarter of Section 28, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 1, Old Airport Short Plat recorded in Auditor File No. 2006164193, Skamania County Records.					
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		
SIGNATURE			DATE		
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.					

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.

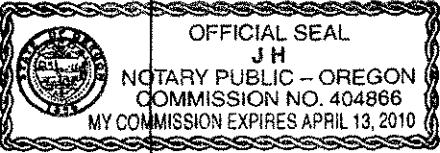
RETURN ADDRESS

Rene & Jody Moreau
PO Box 576
White Salmon, WA 98672

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
<input 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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2008		48 X 27		
2 LAND		LEGAL DESCRIPTION ON PAGE _____			
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 03-08-28-2-2-0308-00	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)		ADDITIONAL NAMES ON PAGE _____			
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
Rene D. Moreau					
NAME OF ADDITIONAL REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
Jody L. Moreau					
ADDRESS	CITY	STATE	ZIP CODE		
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
M&T Bank					
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS	CITY	STATE	ZIP CODE		
5285 SW Meadows Road, Ste 290	Lake Oswego	OR	97035		
GRANTEE					
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 <u>Rene D Moreau</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Jody L Moreau</u>					
NOTARY PUBLIC STAMP JULIE ANDERSEN COMMISSION EXPIRES JUNE 17, 2010 STATE OF WASHINGTON		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <u>Skamania</u> Signed or attested before me on <u>03/21/08</u>			
		by <u>Rene D. Moreau</u> Signature <u>Julie Andersen</u> PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT			
		by <u>Jody L. Moreau</u> <u>Julie Andersen</u> PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY			
		Title <u>Notary</u> AND: County/Office No. OR Dealer No. OR <u>6/17/200</u> 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: <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)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
Marlon Moret		509-427-3920		BP-287-07	
SIGNATURE / POSITION		DATE			
<u>Marlon Moret</u> Building Inspector		4-10-08			

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
			X		
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>[Signature]</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of <u>Oregon</u>		Signed or attested before me on <u>3/24/08</u>	
		County of <u>Clackamas</u>			
		by <u>M & T Bank</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OF AGENT	
		by _____		PRINTED NAME OF NOTARY	
PRINT NAME OF LEGAL OWNER		County/Office No. OR		Dealer No. OR <u>4/13/10</u>	
Title _____		AND: Notary Expiration Date			
DEALERSHIP POSITION/AGENT/NOTARY					
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the Northwest Quarter of the Northwest Quarter of Section 28, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows: Lot 1, Old Airport Short Plat recorded in Auditor File No. 2006164193, Skamania County Records.					
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)					
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NAME (TYPED OR PRINTED)			COUNTY OFFICE/VFS OPERATOR NUMBER		
SIGNATURE			DATE		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
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MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH / WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2008	Woodland	44 X 28	ORFL848A32087WP13	
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 <i>[Signature]</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION / CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of <u>Oregon</u>		Signed or attested before me on <u>3/24/08</u>	
		County of <u>Clackamas</u>			
		by <u>M & T Bank</u>		Signature <i>[Signature]</i>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
		by		PRINTED NAME OF NOTARY	
PRINT NAME OF LEGAL OWNER		County/Office No. OR		Dealer No. OR <u>4/13/10</u>	
Title		AND:		Notary Expiration Date	
DEALERSHIP POSITION / AGENT / NOTARY					
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
A tract of land in the Northwest Quarter of the Northwest Quarter of Section 28, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:					
Lot 1, Old Airport Short Plat recorded in Auditor File No. 2006164193, Skamania County Records.					
8 DEALER'S REPORT OF SALE					
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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>4-23-08</u>		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
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