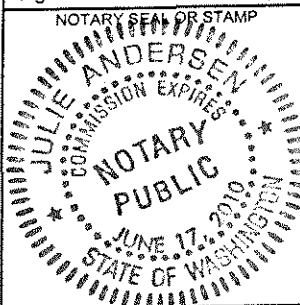


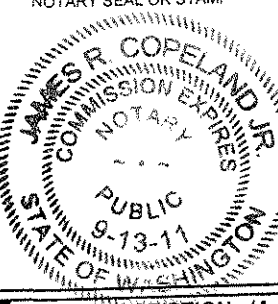
RETURN ADDRESS

Larry & Carol Mulcihy

301 Eyman Cemetery Road

Carson, WA 98610

STATE OF WASHINGTON 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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
@20255	1974	CNCRD	70 X 14	S2535	
2 LAND LEGAL DESCRIPTION ON PAGE <u>1</u>					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 03-08-20-2-0-0201-00	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION S20, T1N, R8E	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE <u>1</u>					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
Jo	2		1		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Larry Mulcihy					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Carol Mulcihy					
ADDRESS		CITY	STATE	ZIP CODE	
301 Eyman Cemetery Rd Carson			WA	98610	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Riverview Community Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
17205 SE Mill Plain Blvd.		Vancouver	WA	98683	
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				[Signature]	
Signature of Additional Registered Owner and Title, IF APPLICABLE				[Signature]	
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on 4/21/08	
		County of: Skamania			
		by Larry Mulcihy		Signature [Signature]	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Carol Mulcihy		Signature [Signature]	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title Notary		AND: County/Office No. OR 6/17/2010			
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 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			
SIGNATURE / POSITION		DATE			
[Signature] Building Inspector		5-1-08			

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER <u>0 20255</u>	YEAR <u>1974</u>	MAKE <u>CNCRD</u>	LENGTH/WIDTH(FEET) <u>70 X 14</u>	VEHICLE IDENTIFICATION NUMBER (VIN) <u>52535</u>	
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 Washington _____		Signed or attested before me on <u>4-25-08</u>	
		County of <u>Skamania</u>			
		by <u>Kathy McKenzie VP</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by _____		PRINTED NAME OF NOTARY		County/Office No. OR	
PRINT NAME OF LEGAL OWNER		AND: _____		Dealer No. OR	
Title <u>Notary</u>		DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date <u>9-13-2011</u>	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
<div style="text-align: center; font-size: 2em; opacity: 0.5;">UNOFFICIAL COPY</div>					
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) <u>Angela Moser</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>30-0108</u>		
SIGNATURE <u>Angela Moser</u>			DATE <u>5-15-08</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.					

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.

EXHIBIT 'A'

PARCEL I

A tract of land in the Northwest Quarter of Section 20, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:

The North 160 feet of the West 88.5 feet of the following described property:

Beginning at a point 20 feet South of the Northeast corner of the Northwest Quarter of the Northwest Quarter of said Section 20; thence West 104.5 feet; thence South 418 feet; thence East 104.5 feet, more or less, to the intersection with the East line of the Northwest Quarter of the Northwest Quarter of said Section 20; thence North 418 feet, more or less, to the point of beginning.

PARCEL II

That portion of the Northwest Quarter of Section 20, Township 3 North, Range 8 East of the Willamette Meridian described as follows:

Beginning at a point 20 feet South of the Northeast Corner of the Northwest Quarter of the Northwest Quarter of the said Section 20; thence West 104.5 feet to the initial point of the Tract hereby described; thence West 104.5 feet; thence South 209 feet; thence East 104.5 feet; thence North 209 feet to the Point of Beginning.

Being Lot 1 of WAYNE ARNOLD SHORT PLAT, recorded in Book 2 of Short Plats at Page 193, under Auditors File No. 91735, records of Skamania County, Washington.