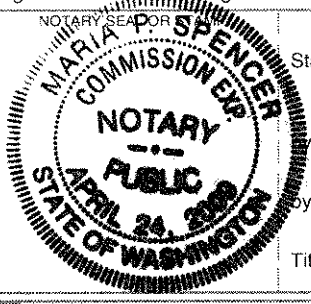


RETURN ADDRESS

CLARK COUNTY TITLE
1503 N.E. 78TH ST. STE. 12
VANCOUVER, WA 98665
ATTN: DEBBIE ABRAMS

WASHINGTON STATE 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)	
%044121	1991	NASHU	28 X 56	NNID30640XU	
2 LAND LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 03750100100200	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
1		SP2-145			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
SKAMANIA	4		1		
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ROBERT A ANDERSON					
NAME OF ADDITIONAL REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
MELISSA A ANDERSON					
ADDRESS		CITY	STATE	ZIP CODE	
751 OLD STATE ROAD		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	
PO BOX 872290		VANCOUVER	WA	98687	
GRANTEE					
NAME					
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>Robert A Anderson</i>			
Signature of Additional Registered Owner and Title, IF APPLICABLE		<i>Melissa A Anderson</i>			
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		Signed or attested before me on			
County of SKAMANIA		7.6.08			
by ROBERT A. ANDERSON		Signature <i>Maria P. Spencer</i>			
PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT			
by MELISSA A. ANDERSON		MELISSA A. ANDERSON			
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title NOTARY		AND: County/Office No. OR 4.24.09			
DEALERSHIP POSITION/AGENT/NOTARY		Dealer No. OR			
		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			
CLARK COUNTY TITLE COMPANY		360-573-4700			
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 Mora		509-422-3920		2343	
SIGNATURE / POSITION		DATE			
<i>Marlon Mora</i> , Building Inspector		7-9-08			

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER %044121	YEAR 1991	MAKE NASHU	LENGTH/WIDTH(FEET) 28 X 56	VEHICLE IDENTIFICATION NUMBER (VIN) NNID30640XU	
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>Kathy McKenzie VP</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE					
		State of Washington County of <u>SKAMANIA</u> Signed or attested before me on <u>7.7.08</u> <i>Kathy McKenzie VP</i> Signature PRINT NAME OF LEGAL OWNER <i>Maria P. Spencer</i> Signature PRINT NAME OF NOTARY MARIA P. SPENCER PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR <u>4.24.09</u> 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 Southeast quarter of the Northeast quarter of Section 1, Township 3 North, Range 7 1/2 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows: Lot 1 of MCCORMICK SHORT PLATS, recorded in Book "2" of SHORT PLATS, page 145, 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) <i>Angela Moser</i>		COUNTY OFFICE/VFS OPERATOR NUMBER <u>30-01-08</u>			
SIGNATURE <i>Angela Moser</i>				DATE <u>7-9-08</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.

Ownership

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check the type of application: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

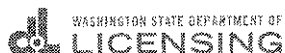
Property tax parcel number: 03750100100200

Additional grantor(s) registered owner(s)	
Name of registered owner RONALD J ANDERSON	DOL customer account number
Name of registered owner CHARLENE ANDERSON	DOL customer account number
Name of registered owner	DOL customer account number
Name of registered owner	DOL customer account number
Name of registered owner	DOL customer account number
Name of registered owner	DOL customer account number

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signature of registered owner(s)	
Signature of registered owner <i>X Ronald J. Anderson</i>	Date 7.6.08
Signature of registered owner <i>X Charlene Anderson</i>	Date 7/6/08
Signature of registered owner <i>X</i>	Date
Signature of registered owner <i>X</i>	Date
Signature of registered owner <i>X</i>	Date
Signature of registered owner <i>X</i>	Date

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
State of Washington County of SKAMANIA	Signed or attested before me on 7.6.08
by RONALD J. ANDERSON Printed name of applicant	Signature of Notary or Agent <i>Maria P. Spencer</i>
Printed name of Notary MARIA P. SPENCER	Notary or Agent
Title NOTARY	Dealer No. OR
Dealership Position/Agent/Notary	AND: County/Office No. OR 4.24.09 Notary Expiration Date



Manufactured Home Application Attachment

Legal description of land

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check the type of application: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

Land: Property tax parcel number: 03750100100200

Legal description:

A tract of land in the Southeast quarter of the Northeast quarter of Section 1, Township 3 North, Range 7 1/2 East of the Willamette Meridian, in the County of Skamania, State of Washington described as follows:

Lot 1 of MCCORMICK SHORT PLATS, recorded in Book "2" of SHORT PLATS, page 145, Skamania County records.