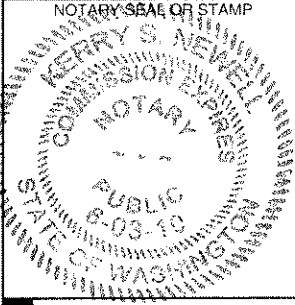
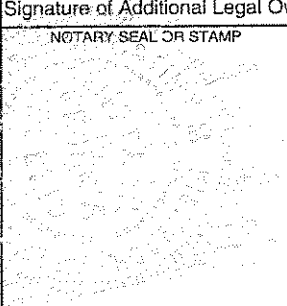


RETURN ADDRESS

Columbia Title Agency
5101 NE 82nd Ave Ste 102
Vancouver, WA 98662
attn: Kerry Newell

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					
TPD / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
8121418	1998	PLMHR	46 X 29	PH202706A	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				02051920012300	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
15		Skamania Highlands			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
30	2		1		
NAME OF REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Stephen L. Banks			BankSSL3170H		
NAME OF ADDITIONAL REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Jessica A. Banks			BanksJA257NT		
ADDRESS		CITY	STATE	ZIP CODE	
381 Highland Rd.		Washougal	WA	98671	
NAME OF LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Taylor Bean + Whitaker Mfg. Corp.					
NAME OF ADDITIONAL LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
1309 114 th Ave SE #101					
ADDRESS		CITY	STATE	ZIP CODE	
		Bellevue	WA	98004	
GRANTEE					
NAME The Public					
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			Stephen L. Banks		
Signature of Additional Registered Owner and Title, IF APPLICABLE			Jessica A. Banks		
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of Clark		before me on 8/7/08	
		by Stephen L. Banks		Signature Kerry S. Newell	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Jessica A. Banks		Signature Kerry S. Newell	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY		County/Office No. OR	
Title Notary		AND: Dealer No. OR		Notary Expiration Date 6/3/10	
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)			TITLE COMPANY / PHONE NUMBER		
Clark County Title			360-694-4722		
SIGNATURE / POSITION			DATE		
[Signature] Title Officer			8/20/08		
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 Morat		509-427-3920		44*98	
SIGNATURE / POSITION		DATE			
[Signature] Building Inspector		8-5-08			

MANUFACTURED HOME - FROM SECTION 1					
TPC/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
8 121418	1998	PLMHR	46X29	PH202706A	
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>Heather Abernathy</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE <u>X</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of <u>GEORGIA</u> County of <u>GWINNETT</u>		Signed or attested before me on <u>8 Aug 2008</u>	
		by <u>HEATHER ABERNATHY</u> PRINT NAME OF LEGAL OWNER		Signature <u>Christina M Fishback</u> NOTARY OR AGENT	
		by _____ PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY	
		Title <u>VICE PRESIDENT</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Notary Public, Gwinnett County, Georgia Dealer No. OR My Commission Expires July 22, 2011 Notary Expiration Date	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 15, Skamania Highlands, according to the Plat thereof, recorded in Book "A" of Plats, page 140, recs 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) <u>Marica Cheek</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>0001-35</u>		
SIGNATURE <u>Marica Cheek</u>			DATE <u>9/4/08</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.