


RETURN ADDRESS

Clark County Title
SALMON CREEK BRANCH
Arthur Jan #116719
14201 NE 20th Ave., Ste B2202
Vancouver, WA 98686
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				ORFL74832009FE13	
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2008	FESTIVAL	60 X 28	ORFL74832009-FE13	
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 02051900180300	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
		#1803 Section 19 Township 2, Range 5			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)				ADDITIONAL NAMES ON PAGE	
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
Skamania	2				
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
DOUGLAS A. MCGREW					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
KRISTI J. MCGREW					
ADDRESS		CITY	STATE	ZIP CODE	
845 N. 8th St. Box 55		Lakeside	OR	97449	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
WELLS FARGO BANK, N.A.					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
(loan # 79143897)					
ADDRESS		CITY	STATE	ZIP CODE	
1000 BLUE GENTIAN ROAD		EAGAN	MN	55121	
GRANTEE					
NAME State of Washington Dept 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>[Signature]</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>[Signature]</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on 10.1.07	
		County of CLARK			
		by DOUGLAS A. MCGREW		Signature <i>[Signature]</i>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by KRISTI J. MCGREW		JOY ZIMMERMAN	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title NOTARY PUBLIC		AND: County/Office No. OR 6/19/09		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			
Joy Zimmerman		Clark County Title 360-834-2984			
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 Morat		509-427-3920		BP-26407	
SIGNATURE / POSITION		DATE			
<i>[Signature]</i> Building Inspector		5-9-08			

MANUFACTURED HOME - FROM SECTION 1		ORFL74832009FE13	
TPO / PLATE NUMBER	YEAR	MAKE	VEHICLE IDENTIFICATION NUMBER (VIN)
	2008	FLEETWOOD FESTIVAL	60 X 28 ORFL748ABC32009-FE13
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>Jeff Douglas</u> <u>Vice President</u>			
Signature of Additional Legal Owner and Title, IF APPLICABLE _____			
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE		
	State of <u>Minnesota</u>	Signed or attested before me on <u>9-25-08</u>	
	County of <u>Washington</u>	Signature <u>Jeff Douglas</u>	
	PRINT NAME OF LEGAL OWNER	NOTARY OR AGENT	
	PRINT NAME OF LEGAL OWNER	Jeffrey S. Becker	
Title <u>NOTARY</u>	AND: County/Office No. OR		Notary Expiration Date <u>1/31/13</u>
DEALERSHIP POSITION/AGENT/NOTARY			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)			
That portion of the Southwest quarter of the Southeast quarter of Section 19, Township 2 North, Range 5 East of the Willamette Meridian, Skamania County, Washington, lying Southerly of the centerline of Skye-Shields County Road (County Road No. 1108) and Westerly of the centerline of Skyeloo County Road (County Road No. 1116); EXCEPT that portion thereof conveyed to School District No. 5 by instrument dated October 18, 1951, recorded May 12, 1952, in Book 35 of Deeds at page 197 under Auditor's File No. 43964; and EXCEPT that portion thereof conveyed to Skamania County for road purposes by instrument recorded September 6, 1974 in Book 67 of Deeds at pages 578 and 579 under Auditor's File No. 78126.			
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
CONSOLIDATED HOMES INC.		4007-0002	10-19-07
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
91,600-	7.6%	<u>Colleen Larver</u>	
<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>10-8-08</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.