

Return Name and Address:

American Title Inc.
11010 Burdette Street
PO Box 641010
Omaha, NE 68164-1010

ATI # 200903260806
Please print or type information

Document Title(s)

Manufactured Home Affidavit of Affixation

Grantor(s)

1. John Tucker

2.

☐ Additional names on page ____ of document

Grantee(s)

1. Wells Fargo Home Mortgage

2.

☐ Additional names on page ____ of document

Legal Description (abbreviated: i.e. lot, block, plat OR section, township, range, qtr/qtr)

Abbreviated Legal: S30, T2N, R5E PID#: 02053000110800

☒ Additional legal is on page 5 of document

Reference Number(s) (Auditor File Numbers) of Documents assigned or released:

☐ Additional numbers on page ____ of document

Assessor's Property Tax Parcel/Account Number

02053000110800

☐ Property Tax Parcel ID is not yet assigned

☐ Additional parcel numbers on page ____ of document

The Auditor/Recorder will rely on the information provided on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information.

20090657600119

_____, 20____
Date_____
Place of Recording**Record & Return by [X] Mail [] Pickup to:**_____
Name_____
Address 1_____
Address 2**Tax Parcel No.** _____

Legal Description is at page ____.

Lot Block Plat or Section_____
Township Range Quarter/Quarter Section**This Instrument Prepared By:****LEAH M. DE VILLE**_____
Preparer's Name**Loan Document Specialist 3**_____
Preparer's Title**2801 4th Avenue South**_____
Preparer's Address 1**Minneapolis, MN 55408**_____
Preparer's Address 2**612-312-7316**_____
Preparer's Telephone Number**N/A**_____
Preparer's Signature**WELLS FARGO HOME MORTGAGE**_____
Lender's Name**1 HOME CAMPUS, X2303-01W**_____
Lender's Address 1**DES MOINES, IA 50328**_____
Lender's Address 2**JOHN TUCKER**_____
Homeowner's Name**81 STEPHANIE LN**_____
Homeowner's Address 1**WASHOUGAL, WA 98671**_____
Homeowner's Address 2**MANUFACTURED HOME AFFIDAVIT OF AFFIXATION**

Homeowner, being duly sworn, on his or her oath, states as follows:

1. Homeowner owns the manufactured home ("Home") described as follows:

New/Used Year	Manufacturer's Name	Model Name or Model No.	Manufacturer's Serial No.	Length / Width
USED 1994	MODULINE	DARTMOUTH 28291	113811	66X27

ATTENTION COUNTY CLERK: This instrument covers goods that are or are to become fixtures on the Land described herein and is to be filed in the real estate conveyance records.

2. The Home was built in compliance with the federal Manufactured Home Construction and Safety Standards Act.
3. If the Homeowner is the first retail buyer of the Home, Homeowner is in receipt of (i) the HUD installation standards disclosure, (ii) the manufacturer's warranty for the Home, (iii) the Consumer Manual for the Home, (iv) the Insulation Disclosure for the Home, and (v) the formaldehyde health notice for the Home.
4. The Home is or will be located at the following "Property Address":

81 STEPHANIE LN	WASHOUGAL	CLARK	WA	98671
Street or Route	City	County	State	Zip Code

5. The legal description of the Property Address ("Land") is:

SEE ATTACHED LEGAL DESCRIPTION

6. The Homeowner is the owner of the Land or, if not the owner of the Land, is in possession of the real property pursuant to a lease in recordable form, and the consent of the lessor is attached to this Affidavit.
7. The Home ☒ is ☐ shall be anchored to the Land by attachment to a permanent foundation, in accordance with applicable federal, state and local building codes and manufacturer's specifications, and permanently connected to appropriate residential utilities (e.g., water, gas, electricity, sewer) ("Permanently Affixed"). Homeowner intends that the Home be an immoveable fixture and a permanent improvement to the Land.
8. The Home shall be assessed and taxed as an improvement to the Land.
9. Homeowner has obtained or shall obtain all permits and certifications required by governmental authorities.
10. If Homeowner is the owner of the Land, any conveyance or financing of the Home and the Land shall be a single transaction under applicable state law.
11. Other than those disclosed in this Affidavit, Homeowner is not aware of (i) any other claim, lien or encumbrance affecting the Home, (ii) any facts or information known to the Homeowner that could reasonably affect the validity of the title of the Home or the existence or non-existence of security interests in it.

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12. [Homeowner shall initial only one of the following, as it applies to title to the Home. Closing Agent: please refer to the Manufactured Home and Land Supplemental Closing Instructions for completion instructions]:

☐ The Home is not covered by a certificate of title. The original manufacturer's certificate of origin, duly endorsed to the Homeowner, is attached to this Affidavit, or previously was recorded in the real property records of the jurisdiction where the Home is to be located.

☐ The Home is not covered by a certificate of title. After diligent search and inquiry, the Homeowner is unable to produce the original manufacturer's certificate of origin.

☒ The manufacturer's certificate of origin and/or certificate of title to the Home [] shall be ☒ has been eliminated as required by applicable law.

☐ The Home shall be covered by a certificate of title.

13. This Affidavit is executed by Homeowner(s) pursuant to applicable state law.

IN WITNESS WHEREOF, Homeowner(s) has executed this Affidavit in my presence and in the presence of the undersigned witnesses on this 02 day of April, 2009.

John Tucker (Seal)
Homeowner #1

JOHN TUCKER
Printed Name

(Seal)
Homeowner #2

Printed Name

Cindy M. Schaffner (Seal)
Witness

Cindy M. Schaffner
Printed Name

(Seal)
Witness

Printed Name

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STATE OF WA)
) ss.:
 COUNTY OF Clark)

On the 02 day of April in the year 2009 before me,
 the undersigned, a Notary Public in and for said State, personally appeared

John Jucker
 personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s)
 (is/are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in
 his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person on
 behalf of which the individual(s) acted, executed the instrument.

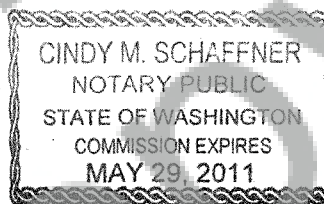
Cindy M. Schaffner
 Notary Signature

Cindy M. Schaffner
 Notary Printed Name

Notary Public; State of WA

Qualified in the County of Clark

My commission expires: 05/29/2011



Official Seal:

ATTENTION COUNTY CLERK: This instrument covers goods that are or are to become fixtures on the Land described herein and is to be filed in the real estate conveyance records.

EXHIBIT A

Reference: 20090657600119

Account: 651-651-2716975-1998

Legal Description:

**THAT PORTION OF THE WEST HALF OF THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 30, TOWNSHIP 2 NORTH, RANGE 5 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS: BEGINNING AT THE NORTHEAST CORNER OF THE WEST HALF OF THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER; THENCE NORTH 89 DEGREES 44 MINUTES 26 SECONDS WEST 736.28 FEET; THENCE SOUTH 00 DEGREES 17 MINUTES 06 SECONDS WEST 326.89 FEET TO THE TRUE POINT OF BEGINNING; THENCE NORTH 85 DEGREES 26 MINUTES 17 SECONDS EAST, 739.21 FEET; THENCE SOUTH 00 DEGREES 33 MINUTES 07 SECONDS WEST 328.44 FEET; THENCE NORTH 89 DEGREES 38 MINUTES 27 SECONDS WEST 706.29 FEET; THENCE NORTH 00 DEGREES 17 MINUTES 06 SECONDS EAST 265.06 FEET TO THE POINT OF BEGINNING. ALSO KNOWN AS LOT 2 OF THE AMENDED JOHNSON SHORT PLAT, RECORDED IN BOOK 3 OF SHORT PLATS, PAGE 225, SKAMANIA COUNTY RECORDS. EXCEPT THAT PORTION LYING WITHIN A STRIP OF LAND 60.00 FEET IN WIDTH, THE CENTER LINE OF WHICH IS DESCRIBED AS THE NORTH-SOUTH CENTERLINE OF THE SOUTHWEST QUARTER OF THE NORTHEAST QUARTER OF THE SOUTHEAST QUARTER OF SAID SECTION 30. ABBREVIATED LEGAL: S30, T2N, R5E
PID #: 02053000110800**

