AFN #2009173053 Recorded 06/04/09 at 05:18 PM DocType: MFHOME Filed by: BRETT EAKINS Page: 1 of 2 Auditor J. Michael Garvison Skamania County, WA

PRETURN ADDRESS	King		
162 Pan	da Rd		
Washovas	LWA 98671		
	1 / 8 / 1 / 8 / 1 / 1		
	Manufactured Hom		PLEASE CHECK ONE
WASHINGTON STATE DEPARTMENT OF LICENSING	Application		E ELIMINATION
	i faise statement of a material fact is	provide and the second	NSFER IN LOCATION IOVAL FROM REAL PROPE
of a felony, and upon conviction	n may be punished by a fine, impriso		
1 MANUFACTURED HOME			
TPO/PLATE NUMBER YEAR	MAKE / JELENGTH/WIDTH(FEET)	VEHICLE IDENTIFICAT	100 NUMBER (VIN) 5 8 14270 PV FD 14
2 LAND # \$85229		DESCRIPTION	PAGE 4/2
MANUFACTURED HOME WILL E	BE AFFIXED REMOVED	REAL PROPERTY	OOO 3 0 00
rot -2 Brock	PLAT NAME OR SECTION/TOWNSHIP/RAN		QUARTER/QUARTER SECTION
3 GRANTOR(S) REGISTERED/	IECAL OVALEDIO)	05	30
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	IONAL NAMES O	ER OF LEGAL (*) SERS
NAME OF REGISTERED OWNER	2		
Brett Eak	V.C	A DOME	DOL CUSTOMER ACCOUNT NUM
NAME OF ADDITIONAL REGISTERED OWNER		- darek K 1 km	DOLCUSTOMER ACCOUNT NUM
ADDRESS	CIPY CIPY	GALIN.	rL392 Na
162 Panda	2d Washerna	1 .	STATE ZIP CODE
NAME OF LEGAL OWNER			DOL CUSTOMER ACCOUNT NUM
NAME OF ADDITIONAL LEGAL OWNER			DOL CUSTOMER ACCOUNT NUM
		- 48	DOL GOSTONIEN ACCOONT NOM
ADDRESS	CITY		STATE ZIP CODE
GRANTEE			
State of W	Jack maker Description	424 6 1	
DO SOLEMNLY ATTEST UNDER	ashington Depart	AM/ARE THE RE	GISTERED OWNERS) OF THIS
VEHICLE AND THIS INFORMATIO	N IS ACCURATE:	P 13	The state of the s
Signature of Registered O	wner and Title, IF APPLICABLE	Ant s	ff.
Signature of Additional Registered C	Owner and Title, IF APPLICABLE	Beacca	Cation
NOTARY CHARGE STAMP NOTARY CHARGE STAMP Sta	NOTARIZATION/CERTIFICATION		
Sta	te of Washington County of ARA	Signed of bef	or attested $6/3/09$
C. SOTARL Z	B- 14 5 1-		1.01
by	PRINT NAME OF REGISTERED OWNER	Signature _/ ,NO	TARY ORAGENT
DI SO PUBLIC STOP by	Robecca Eckins		AIG F JOHNSON
MBER 12	PRINT NAME OF REGISTERED OWNER		County/Office No. OR
	DEALERSHIP POSITION/AGENT/NOTARY	AND:	Dealer No. OR Notary Expiration Date 12/12/12
Certify that the legal description of the	ION he land and ownership is true and correc	of partha real arm	
IAME (TYPED OR PRINTED)	TITLE CO	MPANY / PHONE NUMI	
IGNATURE/PASITION DE JOVE	SKAMANIA	Count Tos	He (10.
The second of the second	hanone	** *	0ATE
inalize this application with a Lice	nsing Agent within 10 calendar days o	of the date Title Co	ompany Representative signs.
BUILDING PERMIT OFFICE CEI	RTIFICATION		
certify that:	ured home has been affixed to the real p mit has been issued for this purpose an	property as describ d the attachment v	ea. vill be inspected upon completion.
AME (TYPED OR PRINTED)	BLOG PERMIT OFFICE/PHONE #		BLDG PERMIT #
GNATURE / POSITION	AND THE RESERVE AND THE RESERV		DATE
-420-729 (R/6/06) W Page 1 of 2	And the second s		bet t 1 to

AFN	#2009173053	Page:	2	of	2
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MANUFACTURI	ED HOME - FF	OM SECTION 1						
TPO / PLATE NUMBE	A YEAR	MAKE MARKU	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION	ON NUMBER (VII	N)		
\$85229	1 197	7 Markete	15 X 70	139850	7 14270	PUFDIAX9011		
6 SIGNATURE	OF LEGAL O	WNER						
SIGNATURE OF	LEGAL OWNE	R INDICATES CONSE	NT FOR ELIMINATI	ON OF TITLE / REMO	VAL FROM	REAL PROPERTY.		
1			N. S. Carlotte	3.7.				
Signati	ure of Legal Ov	vner and Title, IF APPL	JCABLE		3			
Signature of Addi	tional Legal Ov	vner and Title, IF APPL	ICABLE : 1900	CCA Zak	War and the same of the same o	~ ~		
NOTAR MEN	CHRIAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE						
SEFERE G. F.	MANAGE	0000 0000 0						
# 0~ co		County of	Clerk		fore me on_	6/3/3-3		
ATO, OTA	AL Z	7-4	W.		1	7-1-1		
	— . : _{>} !	by South	AL OWNER	Signature	TARY OR AGEN	IT Property Comments		
A PUBL	10°0, 0	by Rebecco	Eckins	pr-1	A11. F	JOHNSON		
MBER	15. 70.	PRINT NAME OF LEG	AL OWNER	PRINTED NAM		4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		
OF W	SHILL	Title	24	AND:	County/Office Dealer	No. OR No. OR		
	ATT IN	DEALERSHIP POSITIO			Notary Expirati			
7 LAND DESCR	RIPTION (A le	gal description of the	land can be obta	ned from the local	County Asse	essor's Office)		
Lot	2	Compin	72. 22	131<	2/0			
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_			7	- 1		1		
- 1	44			-	N 4	-		
O DEALERIO DE								
	EPORT OF SA	MATION IS CORREC						
ANY REQUIRE	D SALES TAX	HAS BEEN COLLEC	TED.	CLEAR OF ENCUM	BRANCES E	EXCEPT AS SHOWN.		
DEALER NAME (TYPED	OR PRINTED)			WA DEALER NUMBE	R DA	TE OF SALE		
PURCHASE PRICE	TAX JU	RISDICTION/TAX RATE C	EALER'S AUTHORIZED	GNATURE				
A CAMPA STATE OF THE REAL PROPERTY.								
OUNTY AUD	TOP/ACENT	le to a Certified Triba	I member on the re	servation (attach no	tarized state	ement of delivery).		
certify that the abo	vo application	LICENSING OFFICE	APPROVAL: (Not	for use by Subagen	ts)			
with the recording of	of this form.	appears to have been o	completed correctly, a	and the applicant has	sufficient doc	umentation to proceed		
VAME (TYPED OR PRIN		distribution of the second		COUNTY OFFICE/VFS	OPERATOR NL	IMBER		
Spared	<u> </u>	Soico 1		30-0	103			
SIGNATURE	- 2	0			DATE			
O TITLE SEES	ed and c					5-4-09		
O TITLE FEES ILING FEE	APPLICATION	MOBILE HOME	FEE ELIMINATIO	N FEE USE TAX				
		Production Providence	ELIVINATIO	N FEE USE TAX		SUBAGENT FEES		
						TOTAL FEES & TAX		
MPORTANT:	Once the ap	olication has been a	pproved by the C	ounty Auditor / Vel	nicle			
	Licensing Of	fi ce, take your applic	cation form to the	County Recording	Office.			
	vour original	of the recording fee application form, ob	s paid. If the Rec	ording Office retain	S form			
APP	LICANTS:	Once recorded, you	u must return to a	Vehicle Licensing	office to file	the		
		Manufactured Hom licensing subagent	ie Application, pay s charge a service	ying all required fe	es. Vehicle			
Eor full	instructions -	······································						
Transfe	r in Location.	n completing this fo see form TD-420-7	rm for Title Elimin 30 Manufactured	ation, Removal fro	m Real Pro	perty or		
			ov, manuactured	i wille Application	mstructions	۶.		