

**AFTER RECORDING MAIL TO:**

Name WFHM FINAL DOCS X2599-024

Address 405 SW 5TH STREET

City/State DES MOINES, IA 50309-4600

etc 31131

**Document Title(s):** (or transactions contained therein)

1. REAL PROPERTY AND MANUFACTURED HOME LIMITED
2. POWER OF ATTORNEY
- 3.
- 4.

**Reference Number(s) of Documents assigned or released:**

☐ Additional numbers on page \_\_\_\_\_ of document

**Grantor(s):** (Last name first, then first name and initials)

1. HOWARD, DONALD J.
2. HOWARD, ELIZABETH J.
- 3.
- 4.

5. ☐ Additional names on page \_\_\_\_\_ of document

**Grantee(s):** (Last name first, then first name and initials)

1. WELLS FARGO BANK, N.A.
2. NORTHWEST TRUSTEE SERVICES LLC
- 3.
- 4.

5. ☐ Additional names on page \_\_\_\_\_ of document

**Abbreviated Legal Description as follows:** (i.e. lot/block/plat or section/township/range/quarter/quarter)

LOT 7 AMBER OAKS

☒ Complete legal description is on page 5 of document

**Assessor's Property Tax Parcel / Account Number(s):** 02-07-20-1-0-0228-00

WA-1

**NOTE:** The auditor/recorder will rely on the information on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.



0104220181

Record and Return ☐ by Mail ☐ by Pickup to:WFHM FINAL DOCS X2599-024405 SW 5TH STREETDES MOINES, IA 50309-4600**REAL PROPERTY AND MANUFACTURED HOME LIMITED POWER OF ATTORNEY**

(To execute or release title, mortgage or deed of trust, security filing, transfer of equity and insurance documents and proceeds.)

The undersigned borrower(s), whether one or more, each referred to below as "I" or "me," residing at:

107 ARIA WAY

Street Address

N BONNEVILLE, WA 98639

("Present Address").

City, State Zip, County

I am the Buyer/Owner of the following manufactured home (the "Manufactured Home"):

USED 2003 SILVERCRESTSILVERCREST070 x 028

New/Used Year Manufacturer's Name

Model Name or Model No.

Length x Width

118-29371A118-29371B

Serial No.

Serial No.

Serial No.

Serial No.

permanently affixed to the real property located at 107 ARIA WAY

Street Address

N BONNEVILLE, SKAMANIA, WA 98639

("Property Address") and as more

City, County, State Zip

particularly described on Exhibit A attached hereto (the "Real Property"). I do hereby irrevocably make, constitute, appoint and authorize with full powers of substitution, WELLS FARGO BANK, N.A.

("Lender"), its successors, assigns or designees as my agent and attorney-in-fact, in my name, place and stead in any way which I could do, if I were personally present, with full power of substitution and delegation, (1) to complete, execute and deliver, in my name or Lender's name, any and all forms, certificates, assignments, designations, releases or other documentation as may be necessary or proper to implement the terms and provisions of the Security Instrument dated JULY 07, 2009 executed by me in favor of Lender, (2) to complete, execute and deliver, in my name or in Lender's name, any and all forms, certificates, assignments, designations, releases or other documentation as may be necessary or proper to make application for and obtain the certificate of title for the Manufactured Home and to have Lender (or its designee) designated as lienholder on the certificate of title for the Manufactured Home, (3) to complete, execute and deliver in my name or Lender's name, any and all forms, certificates, assignments, designations, releases or other documentation as may be necessary or proper to have the Manufactured Home treated as real estate for any and all purposes under state law, including but not limited to the surrender of any certificate of title, any election to treat the Manufactured Home as real estate for tax purposes or to meet any other requirements in order for the loan/financing secured by the Manufactured Home and the Real Property to be eligible for sale on the Federal National Mortgage Association ("Fannie Mae"), the Federal Home Loan Mortgage Association ("Freddie Mac") or any other secondary market purchaser, (4) to receive, complete, execute or endorse, and deliver in my name or Lender's name any and all claim forms, agreements, assignments, releases, checks, drafts or other instruments and vehicles for the payment of money, relating to any insurance covering the Manufactured Home, the indebtedness secured by the Manufactured Home or the Real Property, and (5) to complete, sign and file, without my signature, such financing and continuation statements, amendments, and supplements thereto, mortgages, deeds of trust and other documents, including releases of these items, which I may from time to time deem necessary to perfect, preserve and protect Lender's security interest in the Manufactured Home, the Property and any other property sold with it. I acknowledge that at the time this Power of Attorney and my Security Instrument and any of the forms, certificates, assignments, designations, releases or other documentation are prepared the serial number of the manufactured housing unit may not be available or may be inaccurate. The manufactured housing unit may be a factory order in the process of being constructed. Immediately, upon Lender's receipt of the serial number, I understand and agree that the above items may be completed and/or corrected by Lender to properly disclose all the applicable home identifications, including the serial number. I understand that I will be provided with a copy of any corrected agreement.

To induce any third party to act hereunder, I hereby agree that any third party receiving a duly executed copy or facsimile of this instrument may act hereunder, and I for myself and for my heirs, executors, legal representatives and assigns, hereby agree to indemnify and hold harmless any such third party from and against any and all claims that may arise against such third party by reason of such third party having relied on the provisions of this instrument. I have given this Limited Power of Attorney in connection with a loan/financing to be given by Lender and to induce Lender to make the financing available. It is coupled with an interest in the transaction and is irrevocable. This Limited Power of Attorney shall not be affected by my (our) subsequent incapacity, disability, or incompetence. I do further grant unto Lender full authority and power to do and perform any and all acts necessary or incident to the execution of the powers herein expressly granted, as fully as I might or could do if personally present.

WITNESS my hand and seal this 7-10-09 day of \_\_\_\_\_

Donald J Howard  
Borrower  
DONALD J HOWARD

\_\_\_\_\_  
Witness

Elizabeth J Howard  
Borrower  
ELIZABETH J HOWARD

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Borrower

\_\_\_\_\_  
Witness

STATE OF Washington )  
COUNTY OF Skamania ) ss.:  
 )

On the 10 day of July in the year 2009  
before me, the undersigned, a Notary Public in and for said State, personally appeared  
Donald J Howard & Elizabeth J Howard  
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.

Julie Andersen  
Notary Signature

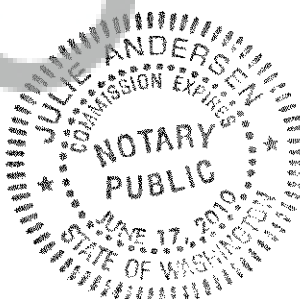
Julie Andersen  
Notary Printed Name

Notary Public, State of Washington

Qualified in the County of Skamania

My Commission expires: 6/17/2010

Official Seal:



Drafted By: LAURIE JENSEN

[ ] Check if Construction Loan

Loan Number: 0104220181

**EXHIBIT A**

**PROPERTY DESCRIPTION**

The legal description of the Property Address ("Land") is typed below or please see attached legal description:

**LEGAL DESCRIPTION ATTACHED HERETO AND MADE A PART HEREOF**

Lot 7 of AMBER OAKS, according to the recorded Plat thereof, recorded in Book 'B' of Plats, Page 117, in the County of Skamania, State of Washington.

This page for use by California Notaries Public only.

State of California  
County of

} ss.

On

before me,

, personally appeared

, who  
proved to me on the basis of satisfactory evidence to be the person(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  
authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity  
upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF  
PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

\_\_\_\_\_  
(Seal)