

**AFTER RECORDING MAIL TO:**

Name WFHM FINAL DOCS X2599-024

Address 405 SW 5TH STREET

City/State DES MOINES, IA 50309-4600

SCAC 31131

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

1. MANUFACTURED HOME AFFIDAVIT OF AFFIXATION
- 2.
- 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 3 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

**MANUFACTURED HOME AFFIDAVIT OF AFFIXATION**

Record and Return ☐ by Mail ☐ by Pickup to:

WFHM FINAL DOCS X2599-024

405 SW 5TH STREET

DES MOINES, IA 50309-4600

This Instrument Prepared By:

LAURIE JENSEN

Preparer's Name

12550 SE 93RD AVE, SUITE 400

Preparer's Address 1

CLACKAMAS, OR 970150000

Preparer's Address 2

0104220181

Loan Number

**ATTENTION COUNTY CLERK:** This instrument covers goods that are or are to become fixtures on the Land described herein and is to be filed for record in the records where conveyances of real estate are recorded.

DONALD J HOWARD  
 ELIZABETH J HOWARD

[type the name of each Homeowner signing this Affidavit]:

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

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

USED	2003	SILVERCREST	SILVERCREST	070 x 028
New/Used	Year	Manufacturer's Name	Model Name or Model No.	Length x Width
118-29371A		118-29371B		
Serial No.		Serial No.	Serial No.	Serial No.

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 manufacturer's warranty for the Home, (ii) the Consumer Manual for the Home, (iii) the Insulation Disclosure for the Home, and (iv) the formaldehyde health notice for the Home.

4. The Home is or will be located at the following "Property Address":

107 ARIA WAY, N BONNEVILLE, SKAMANIA, WA 98639

Street or Route, City, County, State Zip Code

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

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.

TAX STATEMENTS SHOULD BE SENT TO: WELLS FARGO HOME MORTGAGE, P.O. BOX 11701, NEWARK, NJ 071014701

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, constructed in accordance with applicable state and local building codes and manufacturer's specifications in a manner sufficient to validate any applicable manufacturer's warranty, and permanently connected to appropriate residential utilities (e.g., water, gas, electricity, sewer) ("Permanently Affixed"). The Homeowner intends that the Home be an immoveable fixture and a permanent improvement to the Land.

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8. The Home shall be assessed and taxed as an improvement to the Land.
9. Homeowner agrees that as of today, or if the Home is not yet located at the Property Address, upon the delivery of the Home to the Property Address:
  - (a) All permits required by governmental authorities have been obtained;
  - (b) The foundation system for the Home was designed by an engineer to meet the soil conditions of the Land. All foundations are constructed in accordance with applicable state and local building codes, and manufacturer's specifications in a manner sufficient to validate any applicable manufacturer's warranty.
  - (c) The wheels, axles, towbar or hitch were removed when the Home was, or will be, placed on the Property Address; and
  - (d) The Home is (i) Permanently Affixed to a foundation, (ii) has the characteristics of site-built housing, and (iii) is part of the Land.
10. If the 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, the 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.
12. A 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 [X] 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.

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IN WITNESS WHEREOF, Homeowner(s) has executed this Affidavit in my presence and in the presence of the undersigned witnesses on this 21009 day of

Donald J Howard  
Homeowner #1 (SEAL) \_\_\_\_\_ Witness  
DONALD J HOWARD

Elizabeth J Howard  
Homeowner #2 (SEAL) \_\_\_\_\_ Witness  
ELIZABETH J HOWARD

Homeowner #3 (SEAL) \_\_\_\_\_ Witness

Homeowner #4 (SEAL) \_\_\_\_\_ 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

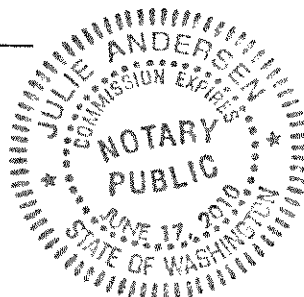
Julie Andersen  
Notary Printed Name

Notary Public, State of Washington

Qualified in the County of Skamania

My Commission expires: 6/17/2010

Official Seal:



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

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)