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RETURN ADDRESS			
Kenneth & Johana Foste	er		
PO Box 857			
Carson, WA 98610			
		•	
			
STATE OF WASHINGTON	MANUFACTURED I	IOME L	PLEASE CHECK ONE
ICENSING Anyone who knowingly makes a fal	APPLICATION	☐TRANS	ELIMINATION FER IN LOCATION /AL FROM REAL PROPERT
of a felony, and upon conviction m	ay be punished by a fine, impris	onment, or both. (RC)	W 46.12.210)
1 MANUFACTURED HOME		E SON SON OF SON SON SON A TIME	• CC CE 1899PPP 2) 254 15
TPO / PLATE NUMBER YEAR A	PalmHarb 26 X 58	VEHICLE IDENTIFICATION PH20-7740	NUMBER (VIN)
2 LAND		L DESCRIPTION ON F	AGE
MANUFACTURED HOME WILL BE	☐ AFFIXED ☐ REMOVED	REAL PROPERTY TAX P 03-08-20-2-	ARCEL NUMBER 1-0409-00
LOT BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RA		UARTER/QUARTER SECTION
2	Stacey Acres Subo		
GRANTOR(S) REGISTERED/LEC	NUMBER OF REGISTERED OWNERS	TIONAL NAMES ON P	AGE
	2		1
NAME OF REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER
KENNETH R. FOSTER NAME OF ADDITIONAL REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER
JOHANA J. FOSTER	X_N_	-	
ADDRESS	CITY		STATE ZIP CODE
PO Box 857 NAME OF LEGAL OWNER	Carson		WA 98610 DOL CUSTOMER ACCOUNT NUMBER
RIVERVIEW COMMUNITY BA	NK		
NAME OF ADDITIONAL LEGAL OWNER	N . <i>J</i>		DOL CUSTOMER ACCOUNT NUMBER
ADDRESS	CITY		STATE ZIP CODE
PO Box 872290	Vancouver		WA 98687
GRANTEE NAME			
I DO SOLEMNLY ATTEST UNDER PE VEHICLE AND THIS INFORMATION IS	NALTY OF PERJURY THAT I / W	E AM/ARE THE REGIS	STERED OWNER(S) OF THIS
	was for	1 - Mal	& coner
Signature of Registered Owner	er and Title, IF APPLICABLE	1. J. J. C.	ates
Signature of Additional Registered Owner		fand y Ys	<u>ALC</u>
	NOTARIZATION/CERTIFICATION	Signed or a	
	County of		me on Vinuary 4 2010
SHARON PINA Notary Public - Arizona Yuma County	Sharm Pina	Signature	ta 200
	T NAME OF REGISTERED OWNER	NOTAR	Y OR AGENT
by	T NAME OF REGISTERED OWNER	PRINTED NAME OF	NOTARY
Title	NOW AND OWNER		Inty/Office No. OR OF STATES
DEAL	ERSHIP POSITION/AGENT/NOTARY		ry Expiration Date
TITLE COMPANY CERTIFICATION certify that the legal description of the l	and and ownership is true and cor	ect per the real propert	v records.
NAME (TYPED OR PRINTED)		OMPANY / PHONE NUMBER	
SIGNATURE / POSITION			DATE
IGNATURE / FOSTION			
inalize this application with a Licensi		of the date Title Com	pany Representative signs.
BUILDING PERMIT OFFICE CERTIF	FICATION I home has been affixed to the rea	I property as described	
I certify that:	has been issued for this purpose a	and the attachment will	be inspected upon completion.
AME (TYPED OR PRINTED)	BLDG PERMIT OFFICE/PHONE	# E	BLDG PERMIT #
IGNATURE / POSITION	**************************************		DATE

TD-420-729 MANUF HOME APPL (R/2/02)OR (W)Page 1 of 2

AFN #2010174732	Page: 2	of 3
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MANUFACTURED HO		SECTION 1	LENGTHAND	TU/ECET	VEHICLE IDEN	TIFICATION NUM	BER (VIN)	
TPO/PLATE NUMBER	YEAR	MAKE	!		PH20-			
SIGNATURE OF L	TO ALL CHANGE	PalmHarbo		- /	1		***************************************	
SIGNATURE OF LEGAL	AL OWNER IN	IDICATES CONS	ENT FOR I	ELIMINA	NON OF TIT	LE / REMOV	AL FROM	REAL PROPERTY.
				FAIL.	Mil	eru	DP.	
		and Title, IF APP						
Signature of Additional		and Title, IF AFF	TATIONICE	DTIEIC A	TION FOR L	EGAL OWN	R(S) SIG	SNATURE
NOTARY SEALOR ST.	Sta	te of Washington County of]	MAN	1100	Signed or att	ested ne on	1-11-2010
A CORNEL	by by	PRINT NAME OF LEG	GAL OWNER	K EMA V P	PRIN	ATED INVESTED IN IL	~	
9-13- Manual OF WAS	Titl	e	ON/AGENT/NE	TARY		Notar	y Expiratio	
7 LAND DESCRIPTI	ON (A legal	description of	the land c	an be ol	tained fror	n the local C	ounty A	ssessor's Office
Lot 2 of t Plat there in Book 'B	of, reco	rded in Au	ditor b	es Su ile N	odivisio o. 2004	on, accor	ding Also	to the recorded
					4			
3 DEALER'S REPO	RT OF SALE	TION IS CORRE	CT THE V	EHICLE I	S CLEAR O	F ENCUMBR	ANCES E	XCEPT AS SHOWN.
ANY REQUIRED S.	ALES TAX H	AS BEEN COLL	ECTED.			ER NUMBER		TE OF SALE
	-	DICTION/TAX RATE	DENI SPIS AL	ITHORIZEC	SIGNATURE			
PURCHASE PRICE		1	The state of the s	- 1				
USE TAX EX	EMPT Sale	to a Certified Trib	al member	on the re	ervation (att	ach notarized	statemen	it of delivery).
A COUNTY AUDITO	DIACENT IIC	ENSING OFFIC	E APPROV	AL: (NO	t for use by	Subagems		umentation to proceed
vith the recording of the	is form.	,64,5 (5 ,14 , 5 , 5 , 5						
MAKE IN OCT OR DOUBLE	1	ac					ERATOR N	MEER WAS IN STAR BEN
NATHAN	PHILL I	<i>r</i> '			70	0119	DAT	
GIGNATURE		Control of the contro						1/20/2010
O TITLE FEES	APPLICATION	MOBILE HO	ME FEE	ELIMINA]	ION FEE	USE TAX		SUBAGENT FEES
				<u> </u>			·	TOTAL FEES & TAX
1 10	censing Office	cation has bee e, take your ar the recording oplication form,	oplication fo fees paid.	orm to the If the Re	ecording Of	Recording Office retains recorded fo	mue.	
Re yo								
yo APPLI	CANTS: C	Once recorded, Manufactured H Idensing subag completing thi	you must lome Appli ents charg	ication, e a serv	baying all rice fee.	equired rees	fice to fi . Vehicle	

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please cal (360) 902-3600 or TTY (360) 664-8885.

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RETURN ADDRES	3S				
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2 LAND			***************************************	SCRIPTION ON PAGE	
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2	BLOCK	1	ME OR SECTION TOWNSHIP HANGE		RTER SECTION
) REGISTERE	D/LEGAL OWN		AL NAMES ON PAGE	
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NAME OF REGISTERS	D CAVNER		4-	DOLCU	STOMER ACCOUNT NUMBE
KENNETH NAME OF ADDITIONAL	R. FOS	STER		DOLCUS	TOMER ACCOUNT NUMBER
JOHANA					
PO BOX			CARSON	state W <u>A</u>	21P CODE 98610
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AME OF ADDITIONAL		IUWLLI L		boron	TOMER ACCOUNT NUMBI
ADORESS			CRTY	STATE	ZIP CODE
PO BOX	872290		VANCOUVER	WA	98687
GRANTEE VALUE					
DO SOLEMNLY VEHICLE AND TH			OF PERJURY THAT I / WE AS PATE:	MARE THE REGISTERED)WNER(S) OF THIS
Signatur	re of Registere	d Owner and Ti	ilo, IF APPLICABLE		
Signature of Addit	tional Registers	ed Owner and Ti	lle, IF APPLICABLE		
NOTARY SEAL O		······································	ZATION/CERTIFICATION FO	R REGISTERED OWNER() SIGNATURE
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		hν	~		
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