AFN #2010176149 Recorded 08/11/10 at 01:49 PM DocType: MFHOME Filed by: FIDELITY NATIONAL TITLE Page: 1 of 2 Auditor Timothy 0. Todd Skamania County, WA

RETURN ADDRESS

	Fidelity Na	ational T	itle						
	16500 SE 15th Street #100								
	Vancouver,	WA 9868:	3						
					•		:		
	WASHINGTON STATE	ISING	Арр	ctured Hon dication	TITLE !	PLEASE CHECK ONE ELIMINATION FER IN LOCATION VAL FROM REAL PROP			
	of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)								
	TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/MOTH(FEET)	VEHICLE IDENTIFICATION	NUMBER (VIN)			
		2010	Clayton	27 X 64	ALB0334100				
•	LEGAL DESCRIPTION ON PAGE MANUFACTURED HOME WILL BE ☐ AFFIXED ☐ REMOVED REAL PROPERTY TAX PARCEL NUMBER 03 08 17 4 0 0904 00								
	MANUFACTURED			REMOVED		04 00 DUARTER/QUARTER SECTION			
	2	BLOCK		Bk 3 Page 81	NGE G	BARTEROUGARTER SECTION			
	GRANTOR(S)	REGISTERED/L		S) ADDI F REGISTERED OWNERS	TIONAL NAMES ON F	PAGEOF LEGAL OWNERS			
			1		1				
	NAME OF REGISTERED Chris J. Smiley	OWNER				DOL CUSTOMER ACCOUNT	NUMBER		
	NAME OF ADDITIONAL P	EGISTERED OWNER	1	XXX		DOL CUSTOMER ACCOUNT	NUMBER		
	ADDRESS			CITY		STATE ZIP CODE WA 98610			
	12 Van Camp R			Carson		DOL CUSTOMER ACCOUNT	NUMBER		
	Vanderbilt Morte		ce, Inc.						
	NAME OF ADDITIONAL L	EGAL OWNER				DOL GUSTOMER ACCOUNT	NUMBER		
	ADDRESS 500 Alcoa Trail			CITY Maryville		STATE ZIP CODE TN 37804			
	GRANTEE NAME								
	The Public								
	TOO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/ WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:								
4.	Signature of Registered Owner and Title, IF APPLICABLE								
	Signature of Addition					<u> </u>			
	NOTARY SEAL OR	,	to of Week		N FOR REGISTERED Signed or	OWNER(S) SIGNATURE			
A L	OFFICIAL SEAL E ANNE M CRA ARY PUBLIC-ORE	W	County of	J.Smile	Signature	re me on 33 June 3	Olas		
			PRINT NAME OF RE	GISTERED OWNER	/2/20	ARY OR AGENT			
MY COMMISSIO	N EXPIRES JUNE 2	by	PRINT NAME OF RE	GISTERED OWNER	PRINTED NAME	OF NOTARY County/Office No. OR			
		Titl	e DEALERSHIP FOSITI	ON/AGENT/NOTARY	AND:	Dealer No. OR	vooux		
	4 TITLE COMPANY CERTIFICATION								
	I certify that the legal description of the land and ownership is true and correct per the real property records. NAME (TYPED OR PRINTED) TITLE COMPANY / PHONE NUMBER								
	Kimberly Remain		2	Fide	Fidelity National Title 360-256-1400				
	1 K	LAND	2			8-12-2010			
	Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs. 5 BUILDING PERMIT OFFICE CERTIFICATION								
,	I certify that:	the manufac	tured home has	been affixed to the re	eal property as describe	ed. ill be inspected upon comp	letion.		
	NAME (TYPED OR PRINT	ED)	BL	DG PERMIT OFFICE/PHOI	NE #	BLDG PERMIT #			
	SIGNATURE / POSITION	Mora	7 2	509-427-	57aU	DATE			
	Marles TD-420-729 (R/6406) W Pa	9 1 01 2	et, ske	reldered.	inspectar)	8-4-10			

APN #20101/0149 rage. 2 Of 2	AFN #2010176149 Page: 2 of	2
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MANUFACTURED HO								
TPO / PLATE NUMBER	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Take Clayton	LENGTHWI	отн(FEET) 7 64		TIFICATION NUMBE	R (VIN)	
6 SIGNATURE OF L	EGAL OWNER		·!				······································	
SIGNATURE OF LEGA	L OWNER INDI	CATES CONSE	NT FOR E	UMINATIC	N OF TITLE	/REMOVAL FR	OM REAL PROPE	RTY.
Signature of	Legal Owner an	d Title, IF APP	LICABLE _	VAN	DERBILT	MORTGAGE &	FINANCE, IEG.	
Signature of Additional	Legal Owner an	d Title, IF APPI	LICABLE _	V	ie 1	15/	\rightarrow	
WOLLD MEDIO	WF	NOTARIZ	ZATION/CI	RTIFICA	TION FOR L	EGAL OWNER	S) SIGNATURE	T.
STATE	State	of Washington County of	B10	Fwe		Signed or attest before me		<i>b</i>
TENNESSE		ENDILT HOR		FINANC	E, ING Sigi	nature Rob	y Ne mo	>
NOTARY	F PR	INT NAME OF LEG	=11	_	0	NOTARY OR	AGENT	
PUBLIC.	人 ^{S by} m	INT NAME OF LEG	EKINA	sey_	PRIN	ITEO NAME OF NOT	MGA	
CIVICO	Title	NO MY	- 400	OTARY		AND: County/C	and the second s	13/13
7 LAND DESCRIPTION			~		ned from th		·····	e)
								
Lot 2 of the Chestor County, Washington						um, puge 01,		
8 DEALER'S REPOR	T OF SALE							
I CERTIFY THAT TH ANY REQUIRED SA				EHICLE IS	CLEAR OF	ENCUMBRANC	CES EXCEPT AS S	HOWN.
Clayton	Homes		· /			ER NUMBER	6/23/	10
PURCHASE PRICE 96442	TAX JURISDICT	TION/TAX RATE	DEALETTO	JIHOHIZED !	SCOATURE CO.	R	*	
	MPT Sale to a					1000	statement of deli	ivery).
9 COUNTY AUDITOR								
I certify that the above ap with the recording of this		rs to have been	completed	correctly,	and the appl	icant has sufficier	nt documentation to	proceed ;
NAME (TYPED OR PRINTED)	Pul.	. 06	7			OFFICENTS OPERA	TOR NUMBER	
NATHAW SIGNATURE	YHILL	11'>			>	00 117	DATE	
-a					···		1 1. 1	010
10 TITLE FEES FILING FEE A	PLICATION	MOBILE HON	ME FEE	EUMINATIO	IN FEE	USE TAX	SUBAGENT FE	FS
	TEIOATION	WODEL TO		Committee	J14 E.C.	000 1777		
Lice Ret	ain proof of the	ake your app e recording fe	lication for	orm to the If the Rec	County Reporting Officer	ecording Office	TOTAL FEES &	TAX
APPLIC	Man		me Appli	cation, pa	aying all re	icensing office quired fees. Ve		
For full insti	ructions on co	mpleting this	form for 1	itle Flimi	nation Re	noval from Rea	al Property or	