

RETURN ADDRESS

Nancy Druckenmiller  
2572 Belle Center Road  
Washougal WA 98671

WASHINGTON STATE DEPARTMENT OF LICENSING		Manufactured Home Application		PLEASE CHECK ONE	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)				<input type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input checked="" type="checkbox"/> REMOVAL FROM REAL PROPERTY	
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
06105094	1995	SKYLN	36X26	01910167 HAB	
<b>2 LAND</b>					
MANUFACTURED HOME WILL BE <input type="checkbox"/> AFFIXED <input checked="" type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				705	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
3		Sec 6, Twnshp 1 N, Rng 5 E.			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		1		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Nancy Druckenmiller				DRUCKNCAL482BU	
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS				CITY	STATE ZIP CODE
2572 Belle Center Road				WASHOUGAL	WA 98671
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Nancy Druckenmiller				DRUCKNC482BU	
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS				CITY	STATE ZIP CODE
2572 Belle Center Road				Washougal	WA 98671
<b>GRANTEE</b>					
NAME					
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE <i>Nancy Druckenmiller</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>					
State of Washington		County of <i>Skamania</i>		Signed or attested before me on <i>01/31/2011</i>	
by <i>Nancy Druckenmiller</i>		Signature <i>Julie A Andersen</i>		NOTARY OR AGENT	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
by		Title <i>Notary</i>		AND: County/Office No. OR Dealer No. OR Notary Expiration Date	
DEALERSHIP POSITION/AGENT/NOTARY				<i>06/17/2014</i>	
<b>4 TITLE COMPANY CERTIFICATION</b>					
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			
<i>Jim Engel</i>		<i>Skamania County Title</i> 509-427-0681			
SIGNATURE / POSITION		DATE			
<i>[Signature]</i>		<i>1-31-2011</i>			
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input checked="" type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.					
NAME (TYPED OR PRINTED)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
SIGNATURE / POSITION				DATE	

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	1995	SKYLN	56X28	01910167HAB	
<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE				
	State of Washington		Signed or attested before me on _____		
	County of _____				
	by _____	Signature _____		NOTARY OR AGENT	
	PRINT NAME OF LEGAL OWNER				
	by _____	PRINTED NAME OF NOTARY			
	PRINT NAME OF LEGAL OWNER				
	Title _____	AND: _____		County/Office No. OR	
	DEALERSHIP POSITION/AGENT/NOTARY		Dealer No. OR		Notary Expiration Date
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
LOT 705 - Lot #3 05 Ward Acres Annex Parcel # 01.05.06-4-0-0705.00 Section 6, Township 1 North, Range 5 East, W.M. Skamania County					
<b>8 DEALER'S REPORT OF SALE</b>					
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.					
DEALER NAME (TYPED OR PRINTED)			WA DEALER NUMBER	DATE OF SALE	
PURCHASE PRICE			TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
<input type="checkbox"/> <b>USE TAX EXEMPT</b> Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.					
NAME (TYPED OR PRINTED)			COUNTY OFFICE/VFS OPERATOR NUMBER		
NATHAN PHILLIPS			30-01-019		
SIGNATURE _____			DATE		
300119			01/31/2011		
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<b>IMPORTANT:</b> Once the application has been approved by the County Auditor / Vehicle Licensing Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.					
<b>APPLICANTS:</b> Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees. Vehicle licensing subagents charge a service fee.					
For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.					

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