

RETURN ADDRESS

Kathleen White
680 NE Bone Rd
Stevenson wa
98648

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 checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
+658884	1970	LEX	34X55	11261	
2 LAND Lot 14 Ridgeview LEGAL DESCRIPTION ON PAGE A-2C150 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				037536320 20600	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
14		Ridgeview Tracts			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
Skamania	1		1		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Kathleen M. White					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS				STATE	ZIP CODE
680 NE Bone Rd Stevenson wa				Wa	98648
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Kathleen M. White					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS				CITY	STATE ZIP CODE
Same					
GRANTEE					
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 Kathleen M White					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		Signed or attested before me on		12/05/12	
County of Skamania		by Kathleen M. White		Signature Julie A. Andersen	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Notary		PRINTED NAME OF NOTARY Julie A. Andersen	
		Title DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 06/07/2014	
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	
SIGNATURE / POSITION				DATE	
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: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input 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 #	
DAVID NAIL		4275970			
SIGNATURE / POSITION		DATE			
David Nail		12/6/12			

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
4658884	70	LEX	24 X 55	11261	
6 SIGNATURE OF LEGAL OWNER					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE: <i>Kathleen M. White</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE: _____					
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE				
	State of Washington County of <i>Skamania</i>		Signed or attested before me on <i>12-6-12</i>		
	by <i>Kathleen M. White</i> PRINT NAME OF LEGAL OWNER		Signature <i>David Q. O'Brien</i> NOTARY OR AGENT		
	by _____ PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY <i>David Q. O'Brien</i>		
	Title <i>Agent</i> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <i>30-01-03</i>		
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 14 of RIDGE VIEW TRACTS according to the official plat thereof on file and of record at page 150 of Book A of Plats, Records of Skamania County, Washington; and a strip of land 20 feet in width connecting the easterly boundary of the county road known and designated as Bone Road with Lot 14 of Ridge View Tracts aforesaid, said strip of land being located between Lots 1, 2 and 14 of said plat and being more particularly described thereon;					
SUBJECT TO easements of record.					
8 DEALER'S REPORT OF SALE					
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"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)					
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) <i>David Q. O'Brien</i>			COUNTY OFFICE/VFS OPERATOR NUMBER <i>30-01-03</i>		
SIGNATURE <i>David Q. O'Brien</i>			DATE <i>12-6-12</i>		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
IMPORTANT: 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.					
APPLICANTS: 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.					