AFN #2014000512 Recorded 03/31/2014 at 10:35 AM DocType: MFHOME Filed by: EARL & CAROL SHIMER Page: 1 of 3 Auditor Timothy O. Todd Skamania County, WA

## RETURN RECORDED DOCUMENT TO:

Earl & Carol Shimer 281 Hilltop Road Washougal, WA 98671

TD-420-729 (R/4/12)WA Page 1 of 3

			_	_ =								
WASHINGTON STATE DEPARTMENT OF LICENSING				actured oplication		Please check one:						
	-			ne Applicatio	□ <b></b>	le Elimination ansfer in Location						
For full instructions on completing this form, see Manufactured Home Application Instructions, form TD-420-730.  Removal from Real Property												
1 Manufactured Home												
TPO/Plate number &167884	Year 1999	Make Flee	etwoo				e identification number (VIN) FLX48A26787-LP13					
2 Land												
Manufactured home will be Real property  ☐ Affixed  Removed Tax parcel no. 0205270008030 Legal descri							iption on	page 2 of 3				
Lot Block NA			Plat name or Section/Township/Range Clifford Orth Short Plat			ıt	1	Quarter/Quarter section NW 1/4/Sec 27				
3 Grantor(s) Registered/Legal Owner(s) - Additional names on page												
County number							<b>.</b>					
Name of registered owner Earl W. Shimer								Washington driver license or UBI number SHIMEEW566P7				
Name of additional registered owner Carol G. Shimer								Washington driver license or UBI number SHIMECG511PS				
Address (Address, City, State, ZIP code) 281 Hilltop Road, Washougal, WA 98671												
Name of legal owner Earl W. Shimer								Washington driver license or UBI number SHIMEEW 566P7				
Name of additional legal owner Carol G. Shimer								Washington driver license or UBI number SHIMECG511PS				
Address (Address, City State, ZIP code) 281 Hilltop Road, Washougal, WA 98671												
I declare under penalty of perjury under the laws of the state of Washington that I am/we are the registered owner(s) of this manufactured home and the foregoing information is true and correct /												
owner(e) or amo	andraotar ou	nomo a	na ino re	X E	in	Ve.	\$					
Signature of registered owner and title, if applicable												
Signature of additional registered owner and title, if applicable  Notariza  State of Whing to County of Claum of I												
Signed or attested before me on March 81, 2014												
FAMILY CAMICA								16. Shiner				
1/1 ( May 31-17	_	Print registered owner name  Print  VICOIC SUNNET					t registered owner name					
Print registered owner name    Mashing   Mashi							lugus 4 31, 2017					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Title /	1		D	ealer/coun	ty office number or notary expiration						

Continued on next page

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Manufactured home TPO/ Plate number (from Section 1)  $\underline{\&167884}$ 4 Title Company Certification Title company name PRINT or TYPE Name of person signing Holly Wilson olumbia Position I certify that the legal description of the land and ownership is true and correct according to the real property records. 5 Building Permit Office Certification I certify that the manufactured home has been affixed to the real property as described. a building permit has been issued for this purpose and the attachment will be inspected upon completion. PRINT or TYPE Name of person signing **Building permit office** Building permit number NONE Position (Area code) Telephone number Date Signature 6 Signature of Legal Owner(s) Signature of legal owner indicates consent for Elimination of Litle or Removal from real property. re of legal owner and title, ignature of additional legal or Notar Zat County of \_ WASHING ST. WASHING WASHING SCRIPTION NIMIC Notary printed or stamped name 7 Land Description Legal description of land The North 237 feet of the South 983 feet of the West 920 feet of the West half of the Northwest quarter of Section 27, Township 2 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington; Also known as Lot 1 of the Clifford Orth Short Plat, recorded in Book 2 of Short Plats, Page 71, Skamania County Records. TD-420-729 (R/4/12)WA Page 2 of 3 Continued on next page AFN #2014000512 Page: 3 of 3

Manufactured h	nome TPO/Plate numb	oer (from Section 1	<u>&amp;167884</u>					
	port of Sale - Sellin							
PRINT or TYPE De	ealer name		Washington dealer number					
NONE	· · · · · · · · · · · · · · · · · · ·							
Date of sale	Purcha	se price	Tax juri	Tax jurisdiction/Tax rate				
☐ Sales Tax E	xempt – Sale to a Cert	ified Tribal member	on the reservation	n (attach notari	ized statement of delivery).			
1	is information is correctales tax has been colle		d home is clear of	encumbrances	s except as shown.			
		<b>X</b> Dea	ler authorized signatur	e				
9 County A	uditor/Agent Licen	sing Office App	roval (not for use	by subagents	5)			
PRINT OF TYPE NO	ame Sa Anders	son	County office/VFS operator number  Skawawa 3001 (6)					
	e above application ap n to proceed with the re			the applicant h	has sufficient			
		X Sign	Alexander Alexan	2 Au	Calen 3/31/14			
10 Title Fees	<b>S</b>							
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees			
			<b>*</b> (	47	Total fees and tax			

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 46.12.750