

RETURN ADDRESS

Timothy R. Callahan
PO Box 1026
Carson, WA 98610

WASHINGTON STATE DEPARTMENT OF LICENSING		Manufactured Home Application		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION	
				<input type="checkbox"/> TRANSFER IN LOCATION	
				<input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
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 48.12.210)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTHXWIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
\$97523	1980	Gibraltar	48 X 24	95120	
2 LAND LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				03-08-21-2-0-0709-00	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
3		ROB CALLAHAN SHORT PLAT			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		1		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
TIMOTHY R. CALLAHAN					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
61 CALLAHAN ROAD		CARSON	WA	98610	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
RIVERVIEW COMMUNITY BANK					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
17205 SE MILL PLAIN BLVD.		VANCOUVER	WA	98683	
GRANTEE					
NAME					
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE <i>Tim R Callahan</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		County of Skamania		Signed or attested before me on 9-26-2014	
by Timothy R. Callahan		Signature Nicole Bennett		NOTARY OR AGENT	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
by		Title		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 83117	
PRINT NAME OF REGISTERED OWNER		DEALERSHIP POSITION AGENT/NOTARY			
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 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 #	
Mardon Moret		509-427-3920			
SIGNATURE / POSITION		DATE			
<i>Mardon Moret</i>		11-6-14			

MANUFACTURED HOME - FROM SECTION 1				
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH/FEET	VEHICLE IDENTIFICATION NUMBER (VIN)
897523	1980	Gibraltar	48 X 24	95120
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>[Signature]</i> VP				
Signature of Additional Legal Owner and Title, IF APPLICABLE: <i>[Signature]</i> EVERETT COMMUNITY BANK				
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE				
NOTARY PUBLIC		State of Washington		
COUNTY OF CLARK		Signed or attested before me on 9.23.14		
by DeAnn Tyler, VP		Signature: <i>[Signature]</i>		
PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT		
by Kenna Christopher		Signature: <i>[Signature]</i>		
PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY		
Title: NOTARY		County/Office No. OR 7-1-18		
DEALER/SHIP POSITION/AGENT/NOTARY		AND: Dealer No. OR Notary Expiration Date		
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)				
A tract of land in the Northwest Quarter of Section 21, Township 3 North, Range 8 East of the Willamette Meridian in the County of Skamania, State of Washington, described as follows:				
Lot 3 of the ROB CALLAHAN SHORT PLAT, according to the official plat thereof recorded in Book 3 of Short Plats, at Page 146, records of Skamania County, Washington.				
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)		COUNTY OFFICER'S OPERATOR NUMBER		
Melissa Anderson		30 01 16		
SIGNATURE		DATE		
<i>[Signature]</i>		11.18.14		
10 TITLE FEES				
PLANS 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.				

KENNA CHRISTOPHER
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
JULY 01, 2018