


RETURN ADDRESS

Larry Lahti
PO Box 224
North Bonneville, WA 98639



WASHINGTON STATE DEPARTMENT OF LICENSING

Manufactured Home Application

PLEASE CHECK ONE

☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ 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 46.12.210)

1 MANUFACTURED HOME

TPO / PLATE NUMBER
%16071

YEAR
1980

MAKE
BrookField

LENGTH/WIDTH(FEET)
28 X 56

VEHICLE IDENTIFICATION NUMBER (VIN)
WAFL2AA11643377A

2 LAND

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

REAL PROPERTY TAX PARCEL NUMBER
02-07-20-3-4-2000-00

LOT
20

BLOCK
8

PLAT NAME OR SECTION/TOWNSHIP/RANGE
Plat of Relocated North Bonneville

QUARTER/QUARTER SECTION

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER

NUMBER OF REGISTERED OWNERS
2

NUMBER OF LEGAL OWNERS
1

NAME OF REGISTERED OWNER
Lisa Lynn Currier

DOL CUSTOMER ACCOUNT NUMBER

NAME OF ADDITIONAL REGISTERED OWNER
Larry Lee Lahti

DOL CUSTOMER ACCOUNT NUMBER

ADDRESS
820 Celilo

CITY
North Bonneville

STATE
WA

ZIP CODE
98639

NAME OF LEGAL OWNER
Riverview Community Bank

DOL CUSTOMER ACCOUNT NUMBER

NAME OF ADDITIONAL LEGAL OWNER

DOL CUSTOMER ACCOUNT NUMBER

ADDRESS
17205 SE Mill Plain Blvd.

CITY
Vancouver

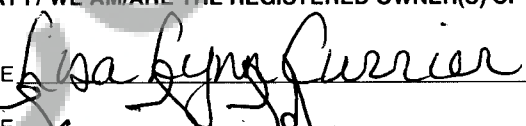
STATE
WA

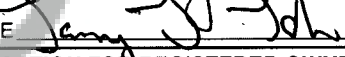
ZIP CODE
98683


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


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 11/13/2014

by Lisa Lynn Currier
PRINT NAME OF REGISTERED OWNER

Signature 

NOTARY OR AGENT

by Larry Lee Lahti
PRINT NAME OF REGISTERED OWNER

Signature Julie A Andersen

PRINTED NAME OF NOTARY

Title Notary

AND: County/Office No. OR
Dealer No. OR
Notary Expiration Date 06/17/2018

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: ☒ 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.

NAME (TYPED OR PRINTED)
DAVID NAAL

BLDG PERMIT OFFICE/PHONE #
509-427-5970

BLDG PERMIT #

SIGNATURE / POSITION


DATE
11/20/14

TD-420-729 (R/6/06) W Page 1 of 2

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

MANUFACTURED HOME - FROM SECTION 1

TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
%16071	1980	BrookField	28 X 56	WAFL2AA11643377A

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 *DeAnn Tyler, VP*

Signature of Additional Legal Owner and Title, IF APPLICABLE *River View Community Rk*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington

County of *CLARK*

Signed or attested before me on *10-30-14*

by *DeAnn Tyler, VP*

PRINT NAME OF LEGAL OWNER

Signature *Kenna Christopher*

NOTARY OR AGENT

PRINTED NAME OF NOTARY

County/Office No. OR

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)

Lot 20, Block 8, PLAT OF RELOCATED NORTH BONNEVILLE, recorded in Book B of Plats, Page 16, under Skamania County File No. 83466 also recorded in Book B of Plats, Page 32, under Skamania County File No. 84429, in the County of Skamania, State of 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

☐ 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 OFFICE/VFS OPERATOR NUMBER

SIGNATURE

DATE

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.

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.