AFN #2016000717 Recorded Apr 18, 2016 12:37 PM DocType: MFHOME Filed by: Jesse & Lori Samsel Page: 1 of 4 File Fee: \$76.00 Auditor Robert J. Waymire Skamania County, WA

**RETURN RECORDED DOCUMENT TO:** 

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JESSE AN	> Le	RI SI	ANISEL			
67 WAR	D L	3)				
WASHOUGH	4_	WA	98671			4
-051-110 60-15	1	<u> </u>	13811	<del></del>		
···						
WASHINGTON STATE DEPA	RTMENT OF	M	anufactured			nse check one:
			Application			le Elimination ansfer in Location
For full instructions of Instructions, form TD-			orm, see Manufactured	1 Home Application		emoval from Real Property
1 Manufactured	Home					
TPO/Plate number	Year ∂Cl.	A PAU	Length/Width (	leet) Vehicle identific		
2 Land			ماد			
Manufactured home will b	-	Real proper	ty el no. <u>C\OSTCGYC</u>	VOICE   OCO	intion on	nage 4
	Block	iax parce	Plat name or Section/Town		iption on	Quarter/Quarter section
Grantor(s) Re	aister	ed/Legai	Owner(s) - Addition	al names on page		
County number		registered ow		Grantee name (if app		
Name of registered owner	ا ا	<del></del>	STAISEL			igton driver license or UBI number
Name of additional register			_ SAMUSEL			agton driver license or UBI number
Name of additional region						AMSESL'41913
Address (Address, City, S		ode)	WASHOUGH	IL WA	18	71
Name of legal owner	1	-			Washin	ngton driver license or UBI number
Name of additional legal of	owner			1	Washin	ngton driver license or UBI number
Address (Address, City S	tate, ZIP d	code)		7	<u> </u>	
I declare under pen	alty of p	erjury und	er the laws of the state	of Washington the	at l am/w	e are the registered
owner(s) of this mai	nufactur	ed home a	and the foregoing inform	nation is true and	gorrect.	
l			<b>X</b>	alast	الا ماملا ام	-Heath /
			Signatur <b>X</b>	of registered owner an	ιο τιτιε, <b>ιτ αρ</b> ί	plicable
				of additional registered	owner and	title, if applicable
Notarization/Certification	ation	Sta	te of LUA	County of	<u>4-K.(</u>	W/JULIT
		Sig	ned or attested before me	on $A$	18,2	اله
(Seal or stamp)		by.	Lovi Sur	<u>らら</u> by _	څر	JSE Scorsel
·			Print registered owner name	Pi CTTV #1	rint register	red owner name
		•	Notally printed or stamped no	ame N	otary signa	ture )
		:	Title	and _ 	ealer/count	ly office number or notary expiration
TD-420-729 (R/5/15)WA Page 1	of 3					Continued on next page

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Manufactured home TPO/ Plat	e number (from Section	on 1)	
4 Title Company Certific	ation		
PRINT or TYPE Name of person signing	ng	Title company name	
Position			(Area code) Telephone number
I certify that the legal description	on of the land and owne	ership is true and correc	t according to the real property records.
		X	
		Signature	Date
5 Building Permit Office	Certification		
I certify that  the manufactured home have building permit has been is			
PRINT or TYPE Name of person signing MARLON MOR	ng	Building permit office	Building permit number
Position S	1/	A*. (	(Area code) Telephone number
- 19		X MM	1-18-16 Date
C. Ciamatana of Long Cu	mor(o)	Orginature	
6 Signature of Legal Ow			
Signature of legal owner indicate	ates consent for Elimin	nation of Title or Remova	al from real property.
		X	
	- ( )	Signature of legal owner and	title, if applicable
	. %	X	
		Signature of additional legal	owner and title, if applicable
Notarization/Certification	State of	, County of	~
	Signed or attested b	before me on	
(Seal or stamp)	by	by	
(Geal of Stamp)	Print legal owner n	name	Print legal owner name
	Notary printed or s	stamped name	Notary signature
	Title	and	Dealer/county office number or notary expiration
7 Land Description	_		
Legal description of land	``		
	d		
SEE EX	HIBIT A"		

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Manufactured	home TPO/Plate nu	mber (from Section 1	)				
8 Dealer R	eport of Sale - Se	elling dealer complete	this section				
PRINT or TYPE	Dealer name	Washington dealer number					
Date of sale	Pur	chase price	Tax juri	ax jurisdiction/Tax rate			
☐ Sales Tax I	Exempt – Sale to a C	ertified Tribal member	on the reservation	n (attach notarize	ed statement of delivery).		
•	his information is cori sales tax has been c	X	d home is clear of	. /	except as shown.		
9 County A	Auditor/Agent Lic	ensing Office App	roval (not for use	by subagents)	<del>/ P</del>		
PRINT OF TYPE N			County office/VFS operator number				
I certify that the documentation	he above application n to proceed with the	appears to be comple recording of this form Sign	ated correctly, and	the applicant ha	s sufficient		
10 Title Fee					4		
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees		
			<b>•</b>		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

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## Exhibit A

A tract of land located in the West half of the Southwest quarter of the Southeast quarter of Section 6, Township 1 North, Range 5 East of the Willamette Meridian, Skamania County, Washington, described as follows:

Lot 3 of the JOSEPH WOLFE SHORT PLAT, recorded in Book 2 of SHORT PLATS, page 206, under Auditor's File No. 92317, recorded April 16, 1981, records of Skamania County, Washington.