


RETURN ADDRESS

Bonner & Anna Goodwin
1272 Mabce Mines Rd.
Washougal, WA 98671

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)

1MANUFACTURED HOME

TPO / PLATE NUMBER

YEAR

MAKE

LENGTH/WIDTH(FEET)

VEHICLE IDENTIFICATION NUMBER (VIN)

2016

Goldenwest

48 X 27

DRM481F

2LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒AFFIXED ☐REMOVED

REAL PROPERTY TAX PARCEL NUMBER

02-05-34-0-0-0503-00

LOT

BLOCK

PLAT NAME OR SECTION/TOWNSHIP/RANGE

QUARTER/QUARTER SECTION

3

Poser Short Plat Bk 1, Pg 17

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

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER

NUMBER OF REGISTERED OWNERS

NUMBER OF LEGAL OWNERS

2

1

NAME OF REGISTERED OWNER

DOL CUSTOMER ACCOUNT NUMBER

Bonner W. Goodwin

NAME OF ADDITIONAL REGISTERED OWNER

DOL CUSTOMER ACCOUNT NUMBER

Anna M. Goodwin

ADDRESS

CITY

STATE

ZIP CODE

1272 Mabce Mines Road

Washougal

WA

98671

NAME OF LEGAL OWNER

DOL CUSTOMER ACCOUNT NUMBER

1st Security Bank of Washington

NAME OF ADDITIONAL LEGAL OWNER

DOL CUSTOMER ACCOUNT NUMBER

ADDRESS

CITY

STATE

ZIP CODE

6920 220th Street SW

Mountain Terrace

WA

98043

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

Bonner W Goodwin

Anna M Goodwin

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington

County of Skamania

Signed or attested before me on May 12, 2016

by Bonner W. Goodwin

Signature

Julie A Andersen

PRINT NAME OF REGISTERED OWNER

NOTARY OR AGENT

by Anna M Goodwin

Signature

Julie A Andersen

PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY

Title Escrow Officer, LPO

AND: County/Office No. OR 0417/2018

Dealer No. OR

Notary Expiration Date

4TITLE 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.

5BUILDING 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)

BLDG PERMIT OFFICE/PHONE #

BLDG PERMIT #

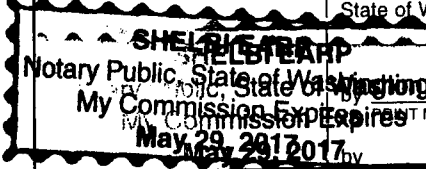
SIGNATURE / POSITION

DATE

Marlon Morat, Building Inspector

9.15.16

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

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2016	Goldenwest	48 X 27	DRM481F	
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>Charles Fortier</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE <i>1st Security Bank of WA</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on <i>5/17/16</i>	
		County of <i>ENOCH</i>			
		Signature <i>Shelby EARP</i>		NOTARY OR AGENT	
		PRINTED NAME OF LEGAL OWNER <i>Charles Fortier</i>		PRINTED NAME OF NOTARY <i>Shelby EARP</i>	
Title <i>Notary</i>		DEALERSHIP POSITION AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <i>5/29/17</i>	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Beginning at the Southeast corner of the North Half of the South Half of the Northeast Quarter of the Southeast Quarter of Section 34, Township 2 North, Range 5 East of the Willamette Meridian, in the County of Skamania, State of Washington, thence North 89° 29' 03" West along the South line of said North half of the South half of the Northeast Quarter of the Southeast Quarter of Section 34, 741.67 feet to the true point of beginning; thence continuing North 89° 29' 03" West along said South line 492 feet, more or less, to the centerline of Mabee Mines County Road; thence North and Easterly along said road to a point that bears North 01° 11' 36" East from the true point of beginning; thence South 01° 11' 36" East from the true point of beginning; thence South 01° 11' 36" West 328 feet, more or less, to the true point of beginning. Also known as Lot 3 POSER SHORT PLAT, recorded in Book 1 of Short Plats, Page 17, Skamania County Records.					
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 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.