


RETURN RECORDED DOCUMENT TO:  
First American Title Insurance Company  
7710 NE Greenwood Drive, Ste 160  
Vancouver, WA 98662

		<b>MANUFACTURED HOME APPLICATION</b>		<b>PLEASE CHECK ONE</b>	
				<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 46.12.210)					
<b>1 MANUFACTURED HOME</b>					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2015	FLEETWOOD	24 X 40	FLE2100R151191AAB	
<b>2 LAND</b>					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				02-05-11-2-4-0111-00	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
11		Hideway II, Book "B", Page 4 / /			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
Clark	1		N/A		
NAME OF REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Ronald D. Kelley			KELERD451M7		
NAME OF ADDITIONAL REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Deborah T. Kelley			KELERDT452D4		
ADDRESS			CITY	STATE	ZIP CODE
102 DOUGAN FALLS LN			WASHOUGAL	WA	98671
NAME OF LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
N/A SAME AS REG. OWNER					
NAME OF ADDITIONAL LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
ADDRESS			CITY	STATE	ZIP CODE
<b>GRANTEE</b>					
NAME					
The Public					
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			Ronald D. Kelley		
Signature of Additional Registered Owner and Title, IF APPLICABLE			Deborah T. Kelley		
<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>					
NOTARY SEAL OR STAMP		State of Washington County of CLARK		Signed or attested before me on 5/27/16	
JACOB A. MENSINGER		by Ronald D. Kelley		Signature	
NOTARY PUBLIC		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
STATE OF WASHINGTON		by Deborah T. Kelley		Jacob A. Mensinger	
COMMISSION EXPIRES		PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY	
JUNE 29, 2017		Notary		County/Office No. OR	
		DEALERSHIP POSITION/AGENT/NOTARY		Dealer No. OR	
				Notary Expiration Date	
				June 29, 2017	
<b>4 TITLE COMPANY CERTIFICATION</b>					
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		
JACOB MENSINGER			FIRST AMERICAN TITLE 360.891.0548		
SIGNATURE/POSITION			DATE		
[Signature]			2/13/2017		
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that:					
<input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described.					
<input 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 #
[Signature]			(509) 427-3920		BP-15-0073
SIGNATURE/POSITION			DATE		
[Signature]			1/25/17		

MANUFACTURED HOME -- FROM SECTION 1					
TRAILER/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET) <b>X</b>	VEHICLE IDENTIFICATION NUMBER (VIN)	
<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington	Signed or attested before me on _____		
		County of <b>CLARK</b>	Signature _____		
		by <b>N/A</b>	NOTARY OR AGENT		
		PRINT NAME OF LEGAL OWNER			
		by _____			
		PRINT NAME OF LEGAL OWNER			
		Title <b>Notary</b>	PRINTED NAME OF NOTARY		
		DEALERSHIP POSITION/AGENT/NOTARY	County/Office No. OR		
			Dealer No. OR		
			Notary Expiration Date		
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
See Attached Exhibit 'A'					
<b>8 DEALER'S REPORT OF SALE</b>					
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) <b>FACTORY EXPO HOMES</b>			WA DEALER NUMBER	DATE OF SALE <b>4-23-15</b>	
PURCHASE PRICE <b>39,799</b>		TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE <i>Terrell Crawford</i>		
<input type="checkbox"/> <b>USE TAX EXEMPT</b> Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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/VPS OPERATOR NUMBER		
SIGNATURE			DATE		
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p><b>IMPORTANT:</b> 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.</p> <p><b>APPLICANTS:</b> 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.</p> <p>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.</p>					

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 TDD (360) 664-8885.

**EXHIBIT A**

**LEGAL DESCRIPTION:** Real property in the County of Skamania, State of Washington, described as follows:

**LOT 11, HIDEAWAY II RECORDED IN BOOK 'B', PAGE 4 PLAT RECORDS, COUNTY OF SKAMANIA AND STATE OF WASHINGTON.**

TOGETHER WITH 2015 FLEETWOOD MODEL 210WR24362L 24x40 PLE2100R1516A12AB  
Tax Parcel ID No. 02051124011100