AFN #2017000498 Recorded Mar 09, 2017 04:37 PM DocType: MFHOME Filed by: COLUMBIA GORGE TITLE Page: 1 of 2 File Fee: \$74.00 Auditor Robert J. Waymire Skamania County, WA

RETURN ADDRESS

David & Be	thany Fast
71 Kathu	thany Fast Lane m, WA 98648
Stevenso	MA 98648

WASHINGTON STATE DEPARTMENT OF LICENSING				Manufactured Home Application						PLEASE CHECK ONE TITLE ELIMINATION TRANSFER IN LOCATION REMOVAL FROM REAL PROPERTY					
Anyone who kr of a felony, and	d upo	n conviction	may	statement of be punishe	d by	a fine	, impris	onment	t, or bo	oth. (R	CW 46.1	2.210)	l.		
MANUFACT	TURE	HOME	,					1							
TPO / PLATE NUMBE	ER	YEAR 2015	MAKE Pal	E m Harbor	LENG		64	1	E IDENT		ON NUMBER	R (VIN)	Ŋ		
2 LAND							LEGA	L DESC	CRIPTI	ON OI	V PAGE	2			
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	S) RE	GISTERED/L	EGAI						LNAM		PAGE .				
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NAME OF REGISTER David Fast	RED OW	NER		1	P	3	7			1	DOI	CUSTO	MER ACC	OUNT NUMB	ER
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ADDRESS 71 Kathy Lan	e				٦	Ste	evenson	þ.			STATI		P CODE 548		
NAME OF LEGAL OV Finance of Ar	VNER	Mortgage	ΙΙC		1)				DOI	CUSTO	MER ACC	OUNT NUMB	ER
NAME OF ADDITION			LLC	$\overline{}$	7		····			1	DOI	CUSTO	MER ACC	OUNT NUMB	ER
ADDRESS 16520 SW U	T	Poor of Form	u Da	Sto 250		CITY	rtland	-	=	4	STATI		P CODE		\dashv
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GRANTEE NAME	7	7	L.		d					1	*				\dashv
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Signature of Add									L	1		J			
NOTARY SEAL	OR STA			OTARIZAT				N FOR	REGIS	STERE	D OWNE	ER(S) S	IGNAT	URE	=
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11/10-17-	18 minus	Titl	_	No	ar	4	TARY			AND:	County/C	ffice No ealer No	. OR <u>CC</u>	dir/x	<u>}/</u>
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certify that the				nd and own	ership	is tru	e and co	rrect pe	er the re	eal pro	perty rec	ords.			\dashv
NAME (TYPED OR PI								COMPA							ヿ
Kell'i SIGNATURE /1909IT	MCX HON,	rshall	//										DATE		\dashv
Finalize this app	dicati	on with a Lic	ensin	Title a Agent wit	C hin 10	Cale	CO Y	s of th	e date	Title (Company	3/	8/3)0 [7]	4
		T OFFICE CE			11		44	, , , , , , , , , , , , , , , , , , , ,				,			\dashv
I certify that:	12	the manufaction building pe	tured	home has b	een a	affixed or this	to the re	al prop	erty as e attac	descr	ibed. will be in	specte	d upon (completion	
NAME (TYPED OR PI	RINTED)					FICE/PHO					PERMIT			\exists
SIGNATURE / POSIT		MOTE	-			B	0				3.	-9-	DATE	7	\exists
D-420-729 (R/6/06) V	N Page	1 of 2			-	7					_				_

AFN #2017000498 Page: 2 of 2

OFFICIAL STAMP
ALISA HOWELL
NOTARY PUBLIC-OREGON
COMMISSION NO. 956453
MY COMMISSION EXPIRES NOVEMBER 09, 2020

MANUEACTURED	OME - EDO!	SECTION 1			·		
MANUFACTURED H	YEAR	MAKE	LENGTH/MOTH(FEET	VEHICLE IDEN	TIFICATION NUMBER	R (VIN)	
	2015	Palm Harbor	27 X 64	3104G285	62A		<u>. 3</u>
6 SIGNATURE OF L	EGAL OWN	ER					
Signature of Signature of		and Title, IF APPL		ON OF TITLE	REMOVAL FRO	OM REAL PROPE	RTY.
Signature of Additional	Legal Owner	and Title, IF APPL	ICABLE				
NOTARY SEAL OR ST	AMP	NOTARIZ	ATION/CERTIFIC	ATION FOR L	EGAL OWNER(S) SIGNATURE	
	St	ate of Washington County of	4, HZAW	670	Signed or atteste before me		-2017
MH	by	7; Ha	ny Coo	per Sign	ature NOTARY OR	AGENT THE	
	by	PRINT NAME OF LEG	AL OWNER		TED NAME OF NOTA	BY	
	Tit	A-777	ey		AND: County/C		MOV- 20
7 LAND DESCRIPT	ION (A legal	description of th	e land can be ob	ained from th	e local County	Assessor's Offic	;e)
A tract of land in the Meridian, in the Co	ounty of Ska	mania, State of	Washington, des	cribed as foll	lows:	- 9	
Lot 4 of the Myers	Short Plat	ecorded in Audi	tor File No. 200	6164190, Ska	mania County	Records.	74
	— '	N			- 4		
//	7		7		- 1	- 1	
M 44				-	_ 1		
8 DEALER'S REPO							allauni.
I CERTIFY THAT T				IS CLEAR OF	ENCUMBRANC	CES EXCEPT AS	SHOWN.
DEALER NAME (TYPED OR				WA DEAL	ER NUMBER	DATE OF SALE	
PURCHASE PRICE	TAX JURIS	DICTION/TAX RATE	DEALER'S AUTHORIZ	ED SIGNATURE		T.	
				4 3			
			nal member on the			statement of de	elivery).
9 COUNTY AUDITO			·			nt documentation	to proceed
with the recording of the	nis form.	podis to navo coo	- Compressor Correct				
MACON PRINTED OF PRINTED	L Ni	CKIAL	15	COUNTY	30-01	TOR NUMBER	
The state of the s	pat	SICK	llu	\		3191	
10 TITLE FEES FILING FEE	APPLICATION	MOBILE HO	ME FEE ELIMIN	ATION FEE	USE TAX	SUBAGENT	FEES
Lio Re	censing Office etain proof o	ce, take your app f the recording f	approved by the dication form to ees paid. If the F obtain a certified	the County Recording Offi	ecording Office ice retains		S & TAX
APPLI	1	Manufactured He	you must return ome Application, ents charge a se	paying all re-	-		
			form for Title El				