

RETURN RECORDED DOCUMENT TO:

JASON LEDESMA
220 NW IMAN CEMETERY RD.
STEVENSON, WA.
98648



Manufactured Home Application

For full instructions on completing this form, see **Manufactured Home Application Instructions**, form TD-420-730.

Please check one:

- ☐ Title Elimination
☒ Transfer in Location
☒ Removal from Real Property

1 Manufactured Home				
Title purpose only (TPO)/Plate no.	Year	Make	Length/Width (feet)	Vehicle identification no. (VIN)
	99	OAK GROVE	48 x 28	WAFLX31A1G543-0G13
2 Land				
Manufactured home will be <input type="checkbox"/> Affixed <input checked="" type="checkbox"/> Removed		Real property Tax parcel no. 03-07-30-3-3-0103-00 Legal description on page 1072		
Lot	Block	Plat name or Section/Township/Range		Quarter/Quarter section
				30
3 Grantor(s) Registered/Legal Owner(s) - Additional names on page				
County no.	No. registered owners	No. legal owners	Grantee name (if applicable)	
30	2	1		
Name of registered owner			Washington driver license or UBI no.	
JASON LEDESMA			LEDESJM259L7	
Name of additional registered owner			Washington driver license or UBI no.	
Bernadette Ledesma				
Address (Address, City, State, ZIP code)				
220 NW IMAN CEMETERY RD. STEVENSON, WA. 98648				
Name of legal owner			Washington driver license or UBI no.	
JASON LEDESMA			LEDESJM259L7	
Name of additional legal owner			Washington driver license or UBI no.	
Address (Address, City, State, ZIP code)				
220 NW IMAN CEMETERY RD. STEVENSON, WA. 98648				
I certify under penalty of perjury under the laws of the state of Washington that I am/we are the registered owner(s) of this manufactured home and the foregoing information is true and correct.				
Date and place (city or county) signed		Registered owner signature		
		X [Signature]		
Date and place (city or county) signed		Registered owner signature		
		X [Signature]		
Notarization/Certification		State of WA, County of SKAMANIA		
		Signed or attested before me on 7/3/2017		
(Seal or stamp)		by JASON LEDESMA by BERNADETTE LEDESMA		
		Print registered owner name		
		NATHAN PHILLIPS		
		Notary printed or stamped name		
		Agent		
		Title		
		and 30-01		
		Dealer/county office number or notary expiration		

Manufactured home TPO/Plate number (from Section 1) _____

4 Title Company Certification

PRINT or TYPE Name of person signing

Kelli Marshall

Title company name

Columbia Gorge Title

Position

Title Officer

(Area code) Telephone no.

509-427-5681

I certify that the legal description of the land and ownership is true and correct according to the real property records.

X

Signature

Date

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.

PRINT or TYPE Name of person signing

Building permit office

Building permit no.

Position

(Area code) Telephone no.

X

Signature

Date

6 Signature of Legal Owner(s)

Signature of legal owner indicates consent for Elimination of Title or Removal from real property.

X

Legal owner signature

Title, if signing for a business

X

Legal owner signature

Title, if signing for a business

Notarization/Certification

State of _____, County of _____

Signed or attested before me on _____

(Seal or stamp)

by _____

Print legal owner name

by _____

Print legal owner name

Notary printed or stamped name

Notary signature

Title

and X

Dealer/county office number or notary expiration

7 Land Description

Legal description of land

See Schedule "A"

Manufactured home TPO/Plate number (from Section 1) _____

8 Dealer Report of Sale – Selling dealer complete this section					
PRINT or TYPE Dealer name _____				Washington dealer no. _____	
Date of sale _____	Purchase price _____		Tax jurisdiction/Tax rate _____		
<input type="checkbox"/> Sales Tax Exempt – Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
I certify under penalty of perjury under the laws of the state of Washington that this information is correct. The manufactured home is clear of encumbrances except as shown. Any required sales tax has been collected.					
Date and place (city or county) signed _____			X Dealer authorized signature _____		
9 County Auditor/Agent Licensing Office Approval (not for use by subagents)					
PRINT or TYPE Name NATHAN PHILLIPS			County office/VFS operator no. 30-01-19		
I certify that the above application appears to be completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.					
X			300119		7/3/2017
Signature					Date
10 Title Fees					
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees
					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

SCHEDULE "A"

THE FOLLOWING DESCRIBED REAL ESTATE, SITUATED IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, TOGETHER WITH ALL AFTER ACQUIRED TITLE OF THE GRANTOR(S) THEREIN:

A TRACT OF LAND IN THE SOUTHWEST QUARTER OF SECTION 36, TOWNSHIP 3 NORTH, RANGE 7 EAST OF THE WILLAMETTE MERIDIAN, IN THE COUNTY OF SKAMANIA, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS:

LOT 4 OF THE DUDLEY SHORT PLAT, RECORDED IN BOOK T OF PLATS, PAGE 106, SKAMANIA COUNTY RECORDS.

EXCEPT THAT PORTION LYING WITHIN ROAD.

SUBJECT TO RESTRICTIONS, RESERVATIONS, EASEMENT, COVENANTS, OIL, GAS OR MINERAL RIGHTS OF RECORD, IF ANY.

TITLE HELD BY: JASON LEDESMA, A MARRIED MAN AS HIS SEPARATE ESTATE

PARCEL: 03073633010300