AFN #2017002062 Recorded Oct 02, 2017 02:56 PM DocType: MFHOME Filed by: Daniel & Audrey Fahrni Page: 1 of 3 File Fee: \$75.00 Auditor Robert J. Waymire Skamania County, WA

RETURN RECORDED DOCUMEN	TTO:						
Daniel & Audrey Fahrni	·	<u>.</u>					
PO Box 627		_					
Carson, WA 98610							
WASHINGTON STATE DEPARTMENT OF	Manufactured Ho	ome PLEASE CHECK ONE					
CL LICENSING	Application	☑ Title Elimination					
For full instructions on completi Instructions, form TD-420-730.	ing this form, see Manufactured Ho	me Application Removal from Real Property					
1 Manufactured Home							
TPO/Plate number Year	Make Length/Width (feet) Man S I 68 x 40	Vehicle identification number (VIN) VMH12836WAC35649 ABC					
2 Land Manufactured home will be	Real property						
Affixed Removed	Tax parcel no. 03-08-28-2-2-0311	Legal description on page 2					
Lot Block	Plat name or Section/Township/	Range Quarter/Quarter section					
3 Grantor(s) Registered	Old Airport Short Plat						
		antes on pageantes on page					
. 2	13.3						
Name of registered owner Daniel C. Fahrni		WA Driver license or UBI number					
Name of additional registered owner		WA Driver license or UBI number					
Audrey D. Fahrni		_ 1 /					
Address (Address, City, State, ZIP cod 271 Old Airport Road, Cars							
Name of legal owner River Community Bank		WA Driver license or UBI number					
Name of additional legal owner		WA Driver license or UBI number					
Address (Address, City State, ZIP cod 17205 SE Mill Plain Blvd, \		· · ·					
I declare 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.							
	x hOa	$a_{n,n}(Q_{n,n})$					
	Signature of re	gistered owner and title, if applicable					
	X Au	ditional registered owner and title, if applicable					
Note visualism / Occability of the m	State of Washington, Co	•					
Notarization/Certification	J						
LESLIE L. MOORE NOTARY PUBLIC	Signed or attested before me on	10/02/2017					
STATE OF WASHINGTON	by <u>Daniel C Fahrr</u>	by Andrey D. Fahrni Print registered owner name					
COMMISSION EXPIRES	Print registered owner name	n X Low I Moon					
JANUARY 9, 2020	Notary printed or stamped name	Notary signature					
	Notary Title	and 0/-09-1010 Dealer/county office number or notary expiration					
TD-420-729 (B/6/11)W Page 1 of 3	· · · · · · · · · · · · · · · · · · ·	Continued on next_page					

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Manufactured home TPO/Plate numb	er (from Section 1)
4 Title Company Certification	
PRINT or TYPE Name of person signing	Title company name
Kelli Marshall	Columbia Gorge Title
Position	(Area code) Telephone number
Title Officer	(509) 427-5681
5 Building Permit Office Certif	land and ownership is true and correct according to the real property records **X*********************************
I certify that the manufactured home has been a building permit has been issued for	affixed to the real property as described. r this purpose and the attachment will be inspected upon completion.
PRINT or TYPE Name of person signing	Building permit office Building permit number
Building Inspect	(Area code) Telephone number 509 421 3900
	\times Nav $0.3\cdot 17$
6 Signature of Legal Owner(s)	
	sent for Elimination of Title or Removal from real property.
Teresa Stamper AVP/Loan Servicing Description Riverview Community	Banl. X
Notarization/Certification Sta	Signature of additional legal owner and title, if applicable te of WA, County of
Sig	ned or attested before me on 9-25-17
LENNA CHRISTOPHER NOTARY PUBLIC	Find the state of
STATE OF WASHINGTON COMMISSION EXPIRES	Title and 7-1-/8 Dealer/county office number or notary expiration
7 Land Description Legal description of land	·
	west Quarter of the Northwest Quarter of Section 28, Township 3 lette Meridian, Skamania County, Washington, more particularly
Lot 3, Old Airport Short Plat record	ed in Auditor File No. 2006164193, Skamania County Records
	·

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Manufactured home TPO/Plate number (from Section 1)									
8 Dealer Report of Sale – Selling dealer complete this section									
PRINT or TYPE Dealer name Valley Quality	Homes			dealer number	4486				
Date of sale 4-6-17	Purchase price 169,	435	Tax jurisdiction	n/Tax rate	17.7				
Sales Tax Exempt – Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).									
I certify that this information is correct. The manufactured home is clear of encumbrances except as shown. Any required sales tax has been collected. X Dealer authorized signature									
County Auditor/Agent Licensing Office Approval (not for use by subagents)									
PRINT OF TYPE Name NATION	ALLIPS	County of	fice/VFS operate	or number					
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. Signature Date Date									
10 Title Fees									
Filing fee Application	Mobile home fe	e Eliminatio	n fee	Use tax	Subagent fees				
-					Total fees & tax 0.00				

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