

RETURN RECORDED DOCUMENT TO:

Aaron S. Towell
Susan L. Ebben
82 Hemlock Y Rd.
Carson WA 98610



Manufactured Home Application

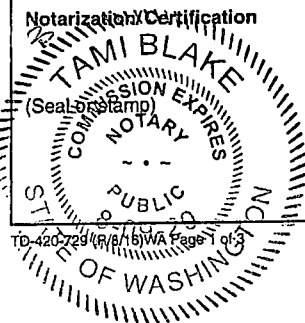
For full instructions on completing this form, see **Manufactured Home
Application Instructions**, form TD-420-730.

Please check one:

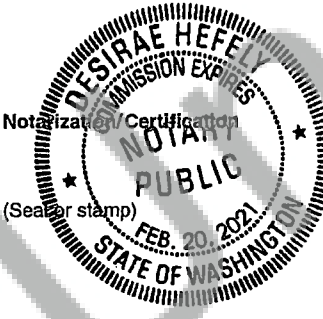
- ☒ Title Elimination
☐ Transfer in Location
☐ Removal from Real Property

| | | | | |
|--|-----------------------|---|--------------------------------|---|
| 1 Manufactured Home | | | | |
| Title purpose only (TPO)/Plate no. | Year 1983 | Make Fleetwood | Length/Width (feet) 36 X 24 | Vehicle identification no. (VIN) SG4708A |
| 2 Land | | | | |
| Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed | | Real property Tax parcel no. <u>0407261005000</u> Legal description on page <u>4</u> | | |
| Lot | Block | Plat name or Section/Township/Range | | Quarter/Quarter section |
| 3 Grantor(s) Registered/Legal Owner(s) – Additional names on page | | | | |
| County no. | No. registered owners | No. legal owners | Grantee name (if applicable) | |
| Name of registered owner Aaron S Towell | | Washington driver license or UBI no. | | |
| Name of additional registered owner Susan L Ebben | | Washington driver license or UBI no. | | |
| Address (Address, City, State, ZIP code) 82 Hemlock Y Rd Carson WA 98610 | | | | |
| Name of legal owner IQ Credit Union | | Washington driver license or UBI no. | | |
| Name of additional legal owner | | Washington driver license or UBI no. | | |
| Address (Address, City State, ZIP code) PO BOX 1739, Vancouver, WA 98668 | | | | |
| 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 2/8/19 Stevenson WA | | Registered owner signature X Aaron S. Towell | | |
| Date and place (city or county) signed 2/8/19 Stevenson WA | | Registered owner signature X Susan L. Ebben | | |
| Notarization/Certification | | | | |
| State of <u>Washington</u> County of <u>Skamania</u> | | Signed or attested before me on <u>February 8, 2019</u> | | |
| by <u>Aaron S Towell</u> | | by <u>Susan L. Ebben</u> | | |
| Print registered owner name <u>Aaron S Towell</u> | | Print registered owner name <u>Susan L. Ebben</u> | | |
| Notary printed or stamped name <u>Tami Blake</u> | | Notary signature <u>Tami Blake</u> | | |
| Title <u>Notary</u> | | and <u>08-09-2020</u> | | |
| Dealer/county office number or notary expiration | | | | |

Continued on next page



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

| | | |
|---|---|---|
| 4 Title Company Certification | | |
| PRINT or TYPE Name of person signing <u>Kelli Marshall</u> | Title company name <u>Columbia Gorge Title</u> | |
| Position <u>Title Officer</u> | (Area code) Telephone no. <u>509-427-5681</u> | |
| I certify that the legal description of the land and ownership is true and correct according to the real property records. | | |
| X <u>[Signature]</u> Signature | | <u>2-14-19</u> Date |
| 5 Building Permit Office Certification | | |
| 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. | | |
| PRINT or TYPE Name of person signing <u>Marlon Morat</u> | Building permit office <u>Sevenson</u> | Building permit no. |
| Position <u>Building Official</u> | (Area code) Telephone no. <u>(509) 427-3920</u> | |
| X <u>[Signature]</u> Signature | | <u>3/6/19</u> Date |
| 6 Signature of Legal Owner(s) | | |
| Signature of legal owner indicates consent for Elimination of Title or Removal from real property. | | |
| X <u>[Signature]</u> Legal owner signature | | Title, if signing for a business |
| X <u>[Signature]</u> Legal owner signature | | Title, if signing for a business |
|  | State of <u>Washington</u> , County of <u>Clark</u> | |
| | Signed or attested before me on <u>January 16, 2019</u> | |
| | by <u>Dianne Smith</u> Print legal owner name | by _____ Print legal owner name |
| | <u>Desirae Hefely</u> Notary printed or stamped name | <u>[Signature]</u> Notary signature |
| | <u>Notary</u> Title | and <u>X Feb 20, 2021</u> Dealer/county office number or notary expiration |
| 7 Land Description | | |
| Legal description of land | | |
| See Attached Exhibit "A" for Full Legal Description--- | | |

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>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.</i> | | | | | |
| Date and place (city or county) signed | | | <input checked="" type="checkbox"/> Dealer authorized signature | | |
| 9 County Auditor/Agent Licensing Office Approval (not for use by subagents) | | | | | |
| PRINT or TYPE Name <u>Kai Hlyn Moser</u> | | | County office/VFS operator no. <u>30-01</u> | | |
| <i>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.</i> | | | | | |
| <input checked="" type="checkbox"/> Signature <u>Kai Hlyn Moser</u> | | | Date <u>3/17/19</u> | | |
| 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

EXHIBIT "A"

Beginning at a point 265 feet West and 70 feet South of the Northeast corner of the Northwest Quarter of the Northeast Quarter of Section 26, Township 4 North, Range 7 East of the Willamette Meridian, in the County of Skamania, State of Washington; thence Southerly along the Westerly boundary of the Wind River Road 25 feet, more or less, to the center of an unnamed creek; thence Westerly following the center of the said unnamed creek a distance of 112 feet to intersection with the Northerly boundary of the South fork of the Hemlock Road; thence following the Northerly boundary of the said Hemlock Road; thence following the Northerly boundary of the said Hemlock Road in a Northwesterly direction 68 feet to intersection with the Southerly boundary of the North fork of the said Hemlock Road; thence following the Southerly boundary of the North fork of the said Hemlock Road Northeasterly 230 feet to the point of beginning;

EXCEPTING THEREFROM rights of way for State and County Roads over and across the above described real property.