Skamania County, WA Total:\$105.50 MFHOME Pgs=3

2019-001687

09/10/2019 12:50 PM

Request of: AMERITITLE



RETURN RECORDED DOCUMENT TO:	
Glenn Molloy	<u>-</u>
31 Chickaree Ln	- -
Underwod, WA 98651	
Manufactured Ho	ome Please check one:
washington state department of manufactured Home LICENSING Application	✓ Title Elimination
For full instructions on completing this form, see Manufactured H Application Instructions, form TD-420-730.	lome ☐ Transfer in Location ☐ Removal from Real Property
1 Manufactured Home	
Title purpose only (TPO)/Plate no. Year ZO19 Make Length/Widt	th (feet) Vehicle identification no. (VIN) 219 K-1D 5789 AB
2 Land	
Manufactured home will be ✓ Affixed ☐ Removed Real property 03 10 15 00 00 200 Tax parcel no.	Legal description on page 2
Lot Block Plat name or Section/Township/	
3 Short Plat 2/097	7
3 Grantor(s) Registered/Legal Owner(s) - Additional n County no. No. registered owners No. legal owners Gr	ames on pageantee name (if applicable)
Name of registered owner Glenn Molloy	Washington driver license or UBI no.
Name of additional registered owner	Washington driver license or UBI no.
Address (Address, City, State, ZIP code) 31 Chickare Ln. Undurwood W	A GCIACI
Name of legal owner	Washington driver license or UBI no.
Glenn Molloy	MOLLOG L403LD
Name of additional legal owner	Washington driver license or UBI no.
Address (Address, City State, ZIP code)	
31 Chickarce Ln. Underwood I certify under penalty of perjury under the laws of the state of M	/ashington that Lam/we are the registered
owner(s) of this manufactured home and the foregoing informati	
7/1/2019 White Sulmer X Stee	Molly
Date and place (city or county) signed Registered owner si	ignature / Title, if signing for a business
Date and place of the country signed Registered owner signed	ignature Title, if signing for a business
Notarization Certification state of LUCIShinth,	County of Cult
Signed or attested before me on	7.1.2019
(Seal or Famp) PUBLY SE Glinn Moll	by
(Seal or Blapp) PUBLIC Signed or attested before me on OLYMPH Signed or attested before me on Printregistered owner pame Notary printed or stamped name Title	Print registered owner name
Notary printed or stamped name	Notary signature and 10232/
Title	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	Title company name						
Amanda Trejo	1 Amerilitie						
Position Escrow Officer	(Area code) Telephone no. \$\\\\$09 - 493 - 1965						
I certify that the legal description of the land and ownership is true and correct according to the real property records.							
V /	8/23/19						
X Signature							
5 Building Permit Office Certification							
I certify that	A / A 3						
the manufactured home has been affixed to the real p	property as described.						
\square a building permit has been issued for this purpose and t	he attachment will be inspected upon completion.						
PRINT or TYPE Name of person signing	Building permit office Building permit no.						
Marion Morat	Stevenson 39-19-0064						
Position	(Area code) Telephone no.						
Building Official	1509 427 3920						
	a lalla						
<u>X</u>	9/10/19						
Signature	Date						
6 Signature of Legal Owner(s)							
Signature of legal owner indicates consent for Elimination	on of Title or Removal from real property						
organization of regal owner interest control in 2 minutes							
X 💉	he long						
Legal own	Title, if signing for a business						
X							
Legal own	ner signature Title, if signing for a business						
	return County of Klickite 4						
Notarization Certification State of Mask							
Signed or attested befor	re me on 7.1.2019						
(Seal ar stamp) NOTARY	101lov by -						
Print legal owner name	Print Jegal owner name						
I TUWAS	ond () Clark						
Notary printed or stamp							
Title U	Dealer/county office number or notary expiration						
Print legal owner name Notary printed or stamp Notary printed or stamp Title Title Legal description Legal description of land							
LOT 3 OF IVADEEN K. BERGE AND CHERY	L M. KOENEMANN'S SHORT PLAT, AS						
RECORDED	•						
UNDER AUDITOR'S FILE NO. 88266 IN BOOK	ζ 2 OF PLATS, AT PAGE 97, RECORDS OF						
SKAMANIA							
COUNTY, WASHINGTON.							

Manufactured hom	Manufactured homeTPO/Plate number (from Section 1)							
Dealer Report of Sale – Selling dealer complete this section								
PRINT or TYPE Dealer name LOFAL HOMES, Inc Date of sale Purchase price T H/25/19 /33,044				Washington dealer no. UBI 601-722-683				
Date of sale 4/25/19	F	Purchase price /23,044	Tax jurisdiction/Tax rate					
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. 9/21/19 Wasco County								
Date and place (city or county) signed Dealer as noticed signature								
9 County Auditor/Agent Licensing Office Approval (not for use by subagents)								
PRINT or TYPE Name Com Zottle Shamoia Audito 30-0								
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 Signature Date								
10 Title Fees								
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees			
				4	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