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

2019-001740

09/17/2019 12:49 PM

Request of: CNA INVESTMENTS

00001088201900017400030036

RETURN RECORDED DOCUMENT TO:	00001088201900017400030038
CNA Investments LLC	<u> </u>
PO Box 721	<u></u>
Stevenson, WA 98648	
	
	 -
washington state department of Manufacture LICENSING Applications (Applications)	tion
For full instructions on completing this form, see Manufactu Instructions, form TD-420-730.	Pernoval from Real Property
1 Manufactured Home	
TPO/Plate number 2018 Godn West 7a x 1	ith (feet) Vehicle identification number (VIN) A BOSS 19202- AB
2 Land	
Manufactured home will be ✓ Affixed ☐ Removed	0-0113-00 Legal description on page 2
Lot Block Plat name or Section/T	
4 TRINK Short PI	
3 Grantor(s) Registered/Legal Owner(s) - Addit	ional names on page
County number No. registered owners No. legal owner 1	Grantee name (if applicable)
Name of registered owner	WA Driver license or UBI humber
CNA Investments LLC	
Name of additional registered owner	WA Driver license or UBI number
Address (Address, City, State, ZIP code) 181 Trink Drive, Carson WA 98610	
Name of legal owner Same	WA Driver license or UBI number
Name of additional legal owner	WA Driver license or UBI number
Address (Address, City State, ZIP code)	
I declare under penalty of perjury under the laws of the stowner(s) of this manufactured home and the foregoing inf	ate of Washington that I am/we are the registered ormation is true and porrect.
W	Bett Chnan
Signa	ure of registered owner and title, if applicable
X	
Signal	ure of additional registered owner and title, if applicable
No rization certification State of Lanhunch	n, County of Skanana
Signed or attested before	man . 9, At. 17-2019
Signed or attested before	me on Jan.
(SE) BUSHOUSE SE BY D'EH JOHN	by
State of AMPLICATION Signed or attested before by ACH John Washing Notary printed or stamped Title	ne Print registered owner name
Notary printed of stamped	name Notary signature
MOTONO	and 10-29-20
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				
Kelli Marshall	Columbia Gorge Title				
Position Title Officer	509- 437-5681				
	p is true, and correct according to the real property records.				
X MUMMUM 9-17-19 Signature Date					
5 Building Permit Office Certification					
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 MARLON MORAT	Building permit office SKA Building permit number P-18-0173				
Position Naux BO.	(Area code) Telephone number 360 624-8381				
Signature Date					
6 Signature of Legal Owner(s)					
Signature of legal owner indicates consent for Elimination of Title or Removal from real property. Signature of legal owner and title, if applicable Signature of additional legal owner and title, if applicable					
Notarization/Certification State of	, County of				
Signed or attested bef	ore me on				
(Seal or stamp) Print legal owner name	by Print legal owner name				
Notary printed or stamper					
Title	and Dealer/county office number or notary expiration				
7 Land Description					
Legal description of land					
A tract of land located in the Northwest Quarter of Section 17, Township 3 North, Range 8 East of the Willamette Meridian, in the County of Skamania, State of Washington, described as follows:					
Lot 4 of the TRINK Short Plat recorded in Auditor Fill County Records	e Number 2007167127 of Short Plats, Skamania				
	•				

Manufactured home TPO/ Plate number (from Section 1)						
8 Dealer Report of Sale - Selling dealer complete this section						
PRINT or TYPE Dealer name			WA dealer number			
Date of sale	Purchase price	Tax juris	Tax jurisdiction/Tax rate			
☐ 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.						
Dealer authorized signature						
9 County Auditor/Agent Licensing Office Approval (not for use by subagents)						
PRINT or TYPE Name County office/VFS operator number 3000						
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 Signature						
10 Title Fees						
Filing fee Application	Mobile home fee	Elimination 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