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

2020-002336
09/01/2020 03:34 PM

Request of: COLUMBIA GORGE TITLE

00005066202000023360030036

RETURN RECORDED DOCUMENT TO:

Christopher Locke 3370 H Street Washougal, WA 98671

| WASHINGTON STATE DE | Manufactured Home Application | | | | Please check one: ☑ Title Elimination ☐ Transfer in Location | | | | |
|---|----------------------------------|---|--|-----------------------------|---|---|--|--|--|
| For full instructions of Application Instruction | on comple ons, form | ting this form, see Manufactured Home FD-420-730. | | | T 4 | Removal from Real Property | | | |
| 1 Manufacture | _ | | | | _ \ | | | | |
| Title purpose only (TPO |)/Plate no. | Year 2020 | Make Montecito | Length/Width (feet) 68 x 28 | | entification no. (VIN) 2100820-20804A, B | | | |
| 2 Land | | | | 8 . I | | | | | |
| Manufactured home will ✓ Affixed ☐ Ren | be noved | Real proper Tax parce | 71/2/15/ 1/98 | 20011200 Lega | al descript | tion on page 2 | | | |
| Lot Block | | | Plat name or Section/Township/Range TRINK Short Plat | | | Quarter/Quarter section | | | |
| 3 Grantor(s) R | egistere | d/Legal | Owner(s) - | Additional names o | on page _ | | | | |
| County no. | No. r | egistered ow | ners No. legal | owners Grantee na | me <i>(if applic</i> | eable) | | | |
| Name of registered own Christopher J Lo | | | | * | | Washington driver license or UBI no. | | | |
| Name of additional registered owner Washington driver license or UB | | | | | | | | | |
| Address (Address, City, 151 Trink Drive, | | | 10 | | | | | | |
| Name of legal owner | . 1 | L. | | | | Washington driver license or UBI no. | | | |
| 1st Cecurity Ban | k of Was | hington | | | | | | | |
| Name of additional legal owner Washington driver license or UB | | | | | | | | | |
| Address (Address, City State, ZIP code) 6920 220th Street SW, Mountlake Terrace, WA 98043 | | | | | | | | | |
| I certify under pen- owner(s) of this ma | alty of per anufacture | rjury under ed home a | r the laws of the nd the foregoi | e state of Washing | ton that I ue and eo | am/we are the registered prrect. | | | |
| L1/8/2020 | Stell | 4M50n | \mathbf{x} | MSTODY | () W | Lor ke | | | |
| Date and place (city or | county) sign | ed | Regis X | stered owner signature | '/s/ - V | Title, if signing for a business | | | |
| Date and place (city or | county) sign | ed | | stered owner signature | | Title, if signing for a business | | | |
| Notarization/Certifi | Cation (| Stat | te of Wash | ungton county | of C | Lamania | | | |
| Signed or attested before me on VOI (18, 3030) (Seal or stamp) ~ ~ ~ ~ by Christopher T Locke by | | | | | | | | | |
| Print registered owner name Continued on ne. | | | | | | | | | |
| OF WE | ISHING | | ritle | ry | ے and | JUNE 1 HDS | | | |
| D-420-729 (R/12/19)WA Rag | (6401x) | | | | | Continued on next page | | | |

| Manufactured home TPO/Plate number (from Section 1) | | | | | | | | |
|--|--|--|--|--|--|--|--|--|
| 4 Title Company Certification | | | | | | | | |
| PRINT or TYPE Name of person signing Kelli Marshall | Collumbia Gorge Title UC | | | | | | | |
| Position Title Officer | (Area Vode) 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. | | | | | | | |
| | · MILLIUM 8-31-2020 | | | | | | | |
| | Signature Date | | | | | | | |
| 5 Building Permit Office Certification | | | | | | | | |
| I certify Mat | <u>u</u> | | | | | | | |
| the manufactured home has been affixed | d to the real property as described. | | | | | | | |
| | ourpose and the attachment will be inspected upon completion. | | | | | | | |
| PRINT or TYPE Name of person signing | Building permit office Building permit no. | | | | | | | |
| Marian Morat | Stevenson 18.20-002 | | | | | | | |
| Position Office Office | (Area code) Telephone no. | | | | | | | |
| Dollain offices | 1 1 1 1 3100 | | | | | | | |
| | 8/25/2020 | | | | | | | |
| | Signature | | | | | | | |
| 6 Signature of Legal Owner(s) | | | | | | | | |
| Signature of legal owner indicates consent t | for Elimination of Title or Removal from real property. | | | | | | | |
| olginature or regar owner indicates consent | (λ) (λ) (λ) | | | | | | | |
| | x Mayon of - Processing Mangriv | | | | | | | |
| Manning | Legal owner signature Title, if signing for a business | | | | | | | |
| SHAUNA NILL | Legal owner signature Legal owner signature Title, if signing for a business | | | | | | | |
| MISSION AND | | | | | | | | |
| Notarization Certification Car State of | WA , county of Snohomish | | | | | | | |
| AT Signed or | attested before me on July 29 4k 2020 | | | | | | | |
| (Seafor stamp) SLIC Sales | my S Graf by 1st Security Bank of WA | | | | | | | |
| Sear of starry 20 | gal owner name Print legal owner name | | | | | | | |
| MASH GTO SHALL | printed or stamped name Notary signature Notary signature | | | | | | | |
| Manual North | 10 Harry and Manufell 3, 2020 | | | | | | | |
| State of Sta | Dealer/county office number or notary expiration | | | | | | | |
| 7 Land Description | | | | | | | | |
| Legal description of land | | | | | | | | |
| A tract of land in the Northwest Quarte | er of Section 17, Township 3 North, Range 8 East of the | | | | | | | |
| | Skamania, State of Washington, described as follows: | | | | | | | |
| | | | | | | | | |
| Lot 3 of the Trink Short Plat recorded in Auditor File No. 2007167127 of Short Plats, Skamania | | | | | | | | |
| County Records | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

| Manufactured home TPO/Plate number (from Section 1) | | | | | | | | | | |
|---|---|--------------------------|-----------------|---------|--------------------|--|--|--|--|--|
| 8 Dealer Report of Sale – Selling dealer complete this section | | | | | | | | | | |
| PRINT or TYPE Deale | | Washington dealer no. | | | | | | | | |
| Date of sale 3 - 27 - 20 | O Purcha | x 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. | | | | | | | | | | |
| 7-10-20 Woodburn OR X Jeresa Cranford Date and place (city or county) signed Dealer authorized signature | | | | | | | | | | |
| | 9 County Auditor/Agent Licensing Office Approval (not for use by subagents) | | | | | | | | | |
| PRINT or TYPE Name | a Zettler | VFS operator no. 30 - 01 | | | | | | | | |
| 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 | | | | | | | | | | |
| 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