

RETURN RECORDED DOCUMENT TO:

Doris & Andrew Jensen  
11611 Washington River Rd.  
Washougal, WA  
98671



## 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

<b>1 Manufactured Home</b>				
Title purpose only (TPO)/Plate no.	Year	Make	Length/Width (feet)	Vehicle identification no. (VIN)
	1983	FTND	44x24	WAF62AD323146666
<b>2 Land</b>				
Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property Tax parcel no. 0205140001000 Legal description on page 4		
Lot	Block	Plat name or Section/Township/Range		Quarter/Quarter section
Manufactured home physical location (Street address, City, State, ZIP code)				Is location mobile home park?
11611 Washington River Road Washougal, WA 98671				<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>3 Grantor(s) Registered/Legal Owner(s) - Additional names on page</b>				
County no.	No. registered owners	No. legal owners	Grantee name (if applicable)	
Name of registered owner			Washington driver license or UBI no.	
Doris Elaine Jensen			JENSEN E488 DC	
Name of additional registered owner			Washington driver license or UBI no.	
Andrew Martin Jensen			JENSEN AM397N9	
Ownership - Joint tenants w/right of survivorship (JTWR0S) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
Address (Address, City, State, ZIP code)				
11611 Washington River Rd., Washougal, WA 98671				
Name of legal owner			Washington driver license or UBI no.	
Name of additional legal owner			Washington driver license or UBI no.	
Address (Address, City, State, ZIP code)				
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		Registered owner signature		
10/21/2020 Skamania		X Doris Elaine Jensen		
Date and place (city or county) signed		Registered owner signature		
10/21/2020 Skamania		X Andrew Martin Jensen		
Notarization/Certification		State of WA, County of Skamania		
Signed or attested before me on		10/21/2020		
by Doris Jensen		by Andrew Jensen		
Print registered owner name		Print registered owner name		
Doris Elaine Jensen		Andrew Martin Jensen		
Notary printed or stamped name		Notary signature		
agent		X [Signature]		
Title		and 30-01		
		Dealer/county office number or notary expiration		

Manufactured home TPO/Plate or Vehicle Identification number (VIN) \_\_\_\_\_

**4 Title Company Certification**

PRINT or TYPE Name of person signing

Title company name

Position

(Area code) Telephone no.

*I certify that the legal description of the land and ownership is true and correct according to the real property records.*

**X**

Signature

Date

**5 Building Permit Office Certification**

I certify that

☐ 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

Building permit office

Building permit no.

Marlan Morat

Sevenson

Position

Building Official

(Area code) Telephone no.

509 427-3900

**X**

Signature

Date

10/28/2020

**6 Signature of Legal Owner(s)**

Signature of legal owner indicates consent for Elimination of Title or Removal from real property.

**X**

Legal owner signature

Title, if signing for a business

**X**

Legal owner signature

Title, if signing for a business

Notarization/Certification

State of \_\_\_\_\_, County of \_\_\_\_\_

Signed or attested before me on \_\_\_\_\_

(Seal or stamp)

by

Print legal owner name

by

Print legal owner name

Notary printed or stamped name

Notary signature

Title

and **X**

Dealer/county office number or notary expiration

**7 Land Description**

Legal description of land

Manufactured home TPO/Plate or Vehicle Identification number (VIN) \_\_\_\_\_

<b>8 Dealer Report of Sale</b> – 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 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.					
Date and place (city or county) signed			X Dealer authorized signature		
<b>9 County Auditor/Agent Licensing Office Approval</b> (not for use by subagents)					
PRINT or TYPE Name Cora Zettler			County office/VFS operator no. Skamania Co. Auditor 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 Signature		Date 10/29/20
<b>10 Title Fees</b>					
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"**  
Legal Description

For APN/Parcel ID(s): 02 05 14 2 2 0101 00

LOT 19 OF HIDEAWAY ON WASHOUGAL, ACCORDING TO THE PLAT THEREOF, RECORDED  
IN  
BOOK "A" OF PLATS, PAGE 151, RECORDS OF SKAMANIA COUNTY, WASHINGTON.

Unofficial  
Copy