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RETURN RECORDED DOCUMENT TO:

Floyd and Phyllis Tennison

1892 Loop Rd  
Stevenson WA 98648



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 2021	Make MARLETTE	Length/Width (feet) 40' x 24'6"	Vehicle identification no. (VIN) HER03222202-AB
<b>2 Land</b>				
Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property 03-01-25-3-0-011200 Tax parcel no. _____ Legal description on page 2		
Lot 1	Block	Plat name or Section/Township/Range SACRE SHORT PLAT AF#		Quarter/Quarter section 2006160365
<b>3 Grantor(s) Registered/Legal Owner(s) - Additional names on page _____</b>				
County no.	No. registered owners 2	No. legal owners 2	Grantee name (if applicable)	
Name of registered owner Floyd P. Tennison			Washington driver license or UBI no. TENNIFP421ML	
Name of additional registered owner Phyllis Tennison			Washington driver license or UBI no. TENNIPE410CA	
Address (Address, City, State, ZIP code) 91 Vendo Trail Stevenson WA 98648				
Name of legal owner Floyd P. Tennison			Washington driver license or UBI no. TENNIFP421ML	
Name of additional legal owner Phyllis Tennison			Washington driver license or UBI no. TENNIPE410CA	
Address (Address, City, State, ZIP code) 91 Vendo Trail Stevenson WA 98648				
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 3/25/2020		X <u>Floyd P. Tennison</u> Registered owner signature Title, if signing for a business		
Date and place (city or county) signed 3/25/2020		X <u>Phyllis Tennison</u> Registered owner signature Title, if signing for a business		
Notary Public ELAINE J. VINCENT Commission Expires APR. 12, 2022		State of <u>Washington</u> , County of <u>Klickitat</u> Signed or attested before me on <u>March 25, 2020</u> by <u>Floyd P. Tennison</u> by <u>Phyllis E. Tennison</u> Print registered owner name <u>ELAINE J. VINCENT</u> Print registered owner name Notary printed or stamped name <u>NOTARY</u> and <u>04.12.2022</u> 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
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.	
<b>X</b> 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.

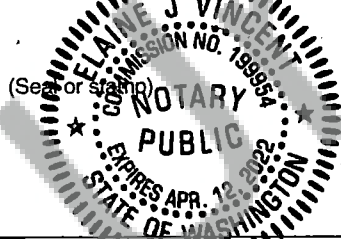
PRINT or TYPE Name of person signing	Building permit office	Building permit no.
Marlon Morat	Servenson	BP-19-0271
Position	(Area code) Telephone no.	
Building Official	509-427-3900	
<b>X</b> Signature	8/2/2021 Date	

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

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

**X** Floyd P. Tennison  
Legal owner signature Title, if signing for a business  
**X** Phyllis E. Tennison  
Legal owner signature Title, if signing for a business

Notarization Certificate



State of Washington, County of Klickitat  
Signed or attested before me on March 25, 2020  
by Floyd P. Tennison by Phyllis E. Tennison  
Print legal owner name Print legal owner name  
Elaine J. Vincent Elaine J. Vincent  
Notary printed or stamped name Notary signature  
Title and **X** 04.12.2022  
Dealer/county office number or notary expiration

**7 Land Description**

Legal description of land  
LOT 1 OF THE SACRE SHORT PLAT, RECORDED UNDER RECORDING NO. 2006160365,  
RECORDS OF SKAMANIA COUNTY, WASHINGTON.

Manufactured home TPO/Plate number (from Section 1) \_\_\_\_\_

**8 Dealer Report of Sale** – Selling dealer complete this section

PRINT or TYPE Dealer name <i>IDEAL HOMES</i>		Washington dealer no.
Date of sale <i>10/26/20</i>	Purchase price <i>161,712</i>	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.

*2/23/21* \_\_\_\_\_ **X** \_\_\_\_\_  
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 <i>Kathlyn Moser</i>	County office/VFS operator no. <i>30-01</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.	
<b>X</b> _____ Signature	_____ Date

**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