Skamania County, WA
Total:\$205.50
MFHOME
Pgs=3

2023-000011
01/03/2023 02:38 PM

Request of: YANCY FRAHS

VAN 4 F24145 POBOX 40 WASHINGTON STATE DEPARTMENT OF Application WASHINGTON STATE DEPARTMENT OF Application For full instructions on completing this form,
WASHINGTON STATE DEPARTMENT OF Manufactured Home LICENSING Application Please check one: Title Elimination
WASHINGTON STATE DEPARTMENT OF Manufactured Home LICENSING Application Please check one: Title Elimination
WASHINGTON STATE DEPARTMENT OF Application Please check one: Application Title Elimination
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washington state department of internation washing application Description Title Elimination
washington state department of internation washing application Description Title Elimination
or run matricularity and completing this form,
see Manufactured Home Application Instructions, form TD-420-730.
_ Kollieva Itelii Tepary
1 Manufactured Home Title purpose only (TPO)/Plate no. Year Make Length/Width (feet) Vehicle identification no. (VIN)
2072 KET 68 x 256 25021069183AB
2 Land
Manufactured home will be Real property
Affixed Removed Tax parcel no. 210 1600 9000 Legal description on page
Manufactured home physical location (Street address, City, State, ZIP code) Is location mobile home park?
1082 LITTLA BUCK BREEK Rd WOLLOW WAGGIS - Yes No
3 Grantor(s) Registered/Legal Owner(s)-Additional names on page
County no. No. registered owners No. legal owners Grantee name (if applicable)
Name of registered owner Washington driver license or UBI no.
VANCY FRAAS Name of additional registered owner Ownership-Joint tenants Washington driver license or UBI no.
w/ngnt of survivorship
(JTWROS) L Yes L No L Address (Address, City, State, ZIP code)
1082 LITTLE BUCK CREER ROAD 400/ELWOOD WH 93651
Name of legal owner Washington driver license or UBI no.
HANCY FRAHS
Name of additional légal owner Washington driver license or UBI no.
Address (Address, City State, ZIP code)
I declare under penalty of perjury under the law of Washington that I am/we are the registered owners of this
manufactured home and the foregoing information is true and correct.
1.3.2023 STAVENSON WAX 141
Date and place (city or county) signed Registered owner signature Title, if signing for a business
Date and place (city or county) signed Registered owner signature C. Title, if signing for a business
Notarization/Certification State of William County of Van William
Stand on affected before one on 1-3.75
Signed or attested before me on
(Seal or stamp) by $\frac{\sqrt{M W}}{\sqrt{M}}$ by $\frac{\sqrt{M W}}{\sqrt{M}}$
Print registered owner name Print tegistered owner name Print tegistered owner name
Notary printed or stamped name Notary signatule
Title and

4 Title Company Certification				
PRINT or TYPE Name of person signing	1	Title company name		
Position			(Area code) Phone number	
I declare that the legal description of the land a	and ownership	is true and correct a	according to the real property records.	
	X			
	Signature		Date	
5 Building Permit Office Certification	n			
I certify that the manufactured home has been affixed t a building permit has been issued for this pu			nspected upon completion.	
PRINT or TYPE Name of person signing MAYON MOYAT		Building permit office	Building permit number	
Building Officia	1/1/	M	(Area code) Phone number 509 437 3900	
	Signature	Many	1/3/23 Date	
6 Signature of Legal Owner(s)				
Signature of legal owner indicates consent fo	or Elimination o	f Title or Removal f	from real property.	
	x 1/1.			
	Legal owner	signature	Title, if signing for a business	
	X L			
	Legal owner	-	Title, if signing for a business	
)	County of	>Kamanta	
A LEOUIE L MOUNE &	ittested before m		623	
(See NOTARY) PUBLIC #98297 by Yan	cy trah		Print legal owner name	
STATE OF WASHINGTON Print legal COMMISSION EXPIRES Notary or	L'IN	000-		
8	rinted or stamped n	ame and	tary signature	
Title		D	Dealer/county office number or notary expiration	
7 Land Description				
Legal description of land	+1 = (2102760 126	THE SOUTHWELT QUANTE	
A TRACT OF LANATH THE S	outhwest b	WILL Trunch	FAR ANDREIL RANGEL	
OF THE NORTHEAST QUANTING	or Section	76 /10cmc=11	Fr 3 1 14 1/10prografic	
EAST OF the WillAmelta M STATE OF WASHINGTON, do	eridian,	in the Coi	inty of skamanoa,	
LOT LOT T.C. FRAILS SH	OR TPLA	T, GC COILD	Ins to the KAT	
Thereof recordel in Bo	ect 2 ot	Short Pla	rs, 174ge 200,	
SKAMANIA COUNTY Rew	15			

Manufactured h	nome TPO/Plate or	Vehicle Identification	number (VIN) $ _$			
8 Dealer Re	port of Sale-Sel	ling dealer complete th	is section			
PRINT or TYPE Dealer name Ideal Homes Inc.				Washington dealer no. MSD594		
Date of sale	1 -	rchase price	Tax juris	ax jurisdiction/Tax rate 7.5%		
☐ Sales Tax E	xempt-Sale to a Ce	ertified Tribal member o	on the reservation	attach notarized	I statement of delivery).	
home is clear of	of encumbrances ex	under the law of Washi rcept as shown. Any re X Dealer au	quired sales tax ha	as been collecte	d.	
9 County A	uditor/Agent Lic	ensing Office Appı	roval (not for use	by subagents)		
PRINT or TYPE Name VIUTUM MUSEV County office/VFS operator no. 30 0						
I declare that to	he above application to proceed with the	n appears to be comple e recording of this form X Signature	aty	4.4	as sufficient - 3- 3-3 Date	
10 Title Fees	5	1 7/14				
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