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

Skamania County, WA
2023-000283
03/06/2023 10:32 AM

Request of: CLARK COUNTY TITLE

## 

## **RETURN RECORDED DOCUMENT TO:**

Retty Coltrane   PO Box 265   Washougal, WA 98671   Please chac. one:    Title Elimination   Transfer in Location   Transfer   Transfer in Location   Transfer	Nathan Coltrane								
Washougal, WA 98671    Washougal, WA 98671   Washougal, WA 98671   Washington driver leanse or UBI no. Name of additional legal owner Setty M. Coltrane Washougal, WA 98671   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. No IARI PUBLIC 86. Washington driver leanse or UBI no. No IARI PUBLIC 86. Washington driver leanse or UBI no. No IARI PUBLIC 86. Washi	Betty Coltrane								
Washougal, WA 98671    Washougal, WA 98671   Washougal, WA 98671   Washington driver leanse or UBI no. Name of additional legal owner Setty M. Coltrane Washougal, WA 98671   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. Name of legal owner   Washington driver leanse or UBI no. Name of additional legal owner   Washington driver leanse or UBI no. No IARI PUBLIC 86. Washington driver leanse or UBI no. No IARI PUBLIC 86. Washington driver leanse or UBI no. No IARI PUBLIC 86. Washi	PO Box 265								
### Manufactured Home Application   Transfer in Location   Transfer		8671							
### Application			<del></del>				4		
### Application	-		·	·	<del></del>				
For full instructions on completing this form, see Manufactured Home Application Instructions, form TD-420-730. Removal from Real Property  I Manufactured Home Title purpose only (TPO)/Plate no.   Year   2022   Eagle   26.8 x   56   FLE2100R21-21689 A&B    I Manufactured home will be   Zeagle   26.8 x   56   FLE2100R21-21689 A&B    I Manufactured home will be   Zeagle   26.8 x   56   FLE2100R21-21689 A&B    I Manufactured home will be   Zeagle   Zea	PER III WASHINGTO	NN STATE DEPARTM	ENT OF	Manufac	tured Hon	ne Ple	ase check one:		
## Amanufactured Home Application Instructions, form TD-420-730.	CL LIC	ENSIN	1G	Appl	ication	<b>∠</b> Ti	tle Elimination		
Title purpose only (TPO)/Plate no. Year 2022 Eagle 26.8 x 56 FLE210OR21 21689 A&B  2 Land  Manufactured home will be					100 700				
Title purpose only (TPO)/Plate no.   Year   Make   Length/Width (feet)   Venicle identification no (VIN)			ation instru	uctions, form 1 L	D-420-730.	□ R	emoval from Real Property		
Zero				I Maria	Language AAE dish (for a	V V- bida ida a	Vision to a (AIN)		
Manufactured home will be   Real property   Tax parcel no. 02052000060200   Legal description on page   Lot   Discrete address, City, State, ZIP code)   Is location mobile home park?   SP 27009   Manufactured home physical location (Street address, City, State, ZIP code)   Is location mobile home park?   372 Mathews Road, Washougal, WA 98671   Yes No.   No. registered owners   No. legal owners   Grantee name (if applicable)   No. registered owners   No. legal owners   Grantee name (if applicable)   No. or registered owners   No. legal owners   Grantee name (if applicable)   No. ownership	Title purpose only (1F	O)/Plate no.							
Manufactured home will be   A parcel no   2205200060200   Legal description on page	2 Land	· • · · · · · · · · · · · · · · · · · ·	2022	Lagic	20.0 🗶 30	TEBETOO	ICI ZIOO/ NOD		
Block   Plat name or Section/Township/Range   SP 2/009   SP 2/009   Its location mobile home park?   372 Mathews Road, Washougal, WA 98671   Yes No   Yes No   No   Registered   Regist		will be R	leal property	/					
SP 2/009   Manufactured home physical location (Street address, City, State, ZIP code)   Is location mobile home park? 372 Mathews Road, Washougal, WA 98671   □ Yes No No   No.   Registered Degal Owner(s) - Additional names on page   County no.   No. registered owners   No. legal owners   Grantee name (if applicable)   No.   Registered owner   No.   Registered owner   Washington driver license or UBI no.   No.   Registered owner   Ownership   Joint tenants   Washington driver license or UBI no.   No.   Po So 265, Washougal, WA 98671   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Washington driver license or UBI no.   Name of legal owner   Name of legal owner   Washington driver license or UBI no.   Name of legal owner	✓ Affixed ☐ Rem	noved T	ax parcel r	no. <u>020520000</u>	60200 Legal				
372 Mathews Road, Washougal, WA 98671  3 Grantor(s) Registered/Legal Owner(s) -Additional names on page  County no.  No. legal owners No. legal owners Grantee name (if applicable)  No. legal owners No. legal owners Grantee name (if applicable)  Name of registered owner Nathan C. Coltrane  Name of additional registered owner Betty M. Coltrane  Name of additional registered owner Washington driver license or UBI no. The second of the s	1	Block	I .		on/Township/Rang	e	Quarter/Quarter section		
County no.   No. registered owners   No. legal owners   Grantee name (if applicable)					ite, ZIP code)		I '		
No. legal owners   No. legal owners   Grantee name (if applicable)    Name of registered owner   Nathan C. Coltrane   Washington driver license or UBI no.    Name of additional registered owner   Betty M. Coltrane   Washington driver license or UBI no.    Name of additional registered owner   Betty M. Coltrane   Washington driver license or UBI no.    Address (Address, City, State, ZIP code)   Yes   No   Washington driver license or UBI no.    Name of legal owner   Washington driver license or UBI no.    Name of additional legal owner   Washington driver license or UBI no.    Name of additional legal owner   Washington that I am/we are the registered owners of this manufactured home and the foregoing information is true and correct   Jana					<u> </u>		∐Yes ☑No		
Name of registered owner Nathan C. Coltrane Name of additional registered owner Betty M. Coltrane Address, (Address, City, State, ZIP code) PO Box 265, Washougal, WA 98671 Name of legal owner Name of additional legal owner  Name of additional legal owner  Name of legal owner  Name of legal owner  Name of additional legal owner  Name of additional legal owner  Name of legal owner  Name of legal owner  Name of additional legal owner  Name of legal owner  Name of additional legal owner  Name of legal owner leants  Name of legal owner legal owner legal on the price of legal							1		
Nathan C. Coltrane  Name of additional registered owner Betty M. Coltrane  Address (Address, City, State, ZIP code) PO Box 265, Washougal, WA 98671  Name of additional legal owner  Name of legal	County no.		gistered own	iers ino, legal ov	mers Grantee nar	пе (п аррпсавте			
Name of additional registered owner Betty M. Coltrane  Address (Address, City, State, ZIP code) PO Box 265, Washougal, WA 98671  Name of legal owner  Name of additional legal owner  Address (Address, City State, ZIP code) PO Box 265, Washougal, WA 98671  Name of additional legal owner  Washington driver license or UBI no.  Name of additional legal owner  Washington driver license or UBI no.  Washington driver license or UBI no.  Title, if signing for a business of this manufactured home and the foregoing information is true and correct of the analysis of the law of washington that I am/we are the registered owners of this manufactured home and the foregoing information is true and correct of the law of washington that I am/we are the registered owners of this manufactured home and the foregoing information is true and correct of the law of washington that I am/we are the registered owners of this manufactured home and the foregoing information is true and correct of the law of washington that I am/we are the registered owners of this manufactured home and the foregoing information is true and correct of the law of washington driver license or UBI no.  Wa				1					
Betty M. Coltrane  Address (Address, City, State, ZIP code) PO Box 265, Washougal, WA 98671  Name of legal owner  Name of additional legal 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.  2/27/23  Date and place (city or county) signed  Date and place (city or county) signed  Registered owner signature  Registered owner signature  Title, if signing for a business  Notarization/Certification  State of Washington that I am/we are the registered owners of this  Title, if signing for a business  CHRISTY EVANS signed or attested before me on NOTARY PUBLIC #8511 Act of Washington that I am/we are the registered owner of this  Title, if signing for a business  CHRISTY EVANS signed or attested before me on NOTARY PUBLIC #8511 Act of Washington that I am/we are the registered owner of this  Title, if signing for a business  CHRISTY EVANS signed or attested before me on NOTARY PUBLIC #8511 Act of Washington that I am/we are the registered owner of this  Washington driver license or UBI no.  Washington driver license or UBI no	L				<del> </del>				
Address (Address, City State, ZIP code) PO Box 265, Washougal, WA 98671  Name of legal 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  2/27/23  Date and place (city or county) signed  Date and place (city or county) signed  Registered owner signature  Registered owner signature  Title, if signing for a business  Notarization/Certification  State of Washington that I am/we are the registered owners of this  Title, if signing for a business  CHRISTY EVANS signed or attested before me on NOTARY PUBLIC #68711  (Seal or stang) ATE OF WASHINGT by Bright registered owner name  COMMISSION EXPRES  MARCH 20, 2023  Notary signature		_	ner	w/	right of surviv <u>or</u> ship				
Name of legal owner  Name of additional legal owner  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  2/2//23  Date and place (city or county) signed  Registered owner signature  Registered owner signature  Title, if signing for a business  Notarization (Certification  State of Gahington that County of Charles of Charles of County of Cou	1	The second secon	2 code)	(J	rwros) 🗀 Ye	s No w	10 14 24 1 L 1 3D		
Name of legal owner  Name of additional legal owner  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  2/2//23  Date and place (city or county) signed  Registered owner signature  Title, if signing for a business  Notarization/Certification  State of Cashington that I am/we are the registered owners of this  Registered owner signature  Title, if signing for a business  Notarization/Certification  State of Cashington that I am/we are the registered owners of this  Title, if signing for a business  Christy Evans Signed or attested before me on  CHRISTY EVAN Signed or attested before me on  NOTARY PUBLIC #8511   104 has C. Col trane  STATE OF WASHINGTON finit registered owner name  CHRISTY EVANS Notary printed of stamped name  NOTARY PUBLIC #8511   104 has C. Col trane  NOTARY PUBLIC #8511   104 has C. Col trane						b. 7b-			
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.  2/21/23						W	ashington 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.  2/21/23	F .4	. 7			7 N.	1 1	h		
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  2/27/23	Name of additional le	gal owner			-	W	ashington driver license or UBI no.		
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  2/27/23							· · · · · · · · · · · · · · · · · · ·		
manufactured home and the foregoing information is true and correct?  2/2//23  Date and place (city or county) signed  Date and place (city or county) signed  Registered owner signature  Registered owner signature  Title, if signing for a business  Registered owner signature  Title, if signing for a business  Registered owner signature  Title, if signing for a business  CHRISTY EVANS signed or attested before me on  CHRISTY EVANS signed or attested before me on  NOTARY PUBLIC #68711 MATTAN C. County of  COMMISSION EXPIRES TOTALE  MARCH 20, 2023 Plotary printed of stamped name  Notary signature									
Date and place (city or county) signed    Registered owner signature   Title, if signing for a business	I declare under per manufactured hom	nalty of per ne and the f	iury under oregoing ir	the law of Wasl nformation is tru	nington that I am/ e and correct?	we are the reg	gistered owners of this		
Date and place (city or county) signed  Registered/owner signature  Registered/owner signature  Registered/owner signature  Title, if signing for a business  Notarization/Certification  State of Washington, County of  CHRISTY EVANSigned or attested before me on  NOTARY PUBLIC #68711  N					110				
Notarization/Certification  State of Washington, County of  CHRISTY EVANSigned or attested before me on  NOTARY PUBLIC #68711  (Seal or stamp) ATE OF WASHINGTON  MARCH 20, 2023  Notary printed of stamped name  MARCH 20, 2023  Registered owner signature  Title, if signing for a business  CLAUK  CLAUK  Point of Signing for a business  CLAUK  Print registered owner name  Notary signature  3/20/237			-	Register	ed owner signature		Title, if signing for a business		
Notarization/Certification  State of Washington, County of Clark  CHRISTY EVANSigned or attested before me on Feb. 27 2023  NOTARY PUBLIC #68711 Nathan C. Coltrane by Betty M. Coltrane  COMMISSION EXPRES OF 13ty Frans  MARCH 20, 2023 Notary printed of stamped name  March 20, 2023 Notary printed of stamped name  Notary signature 3/20/2323	Date and place (city	or county) sid	ned	Redister	ed owner signature		Title, if signing for a business		
CHRISTY EVANSigned or attested before me on Feb. 27 223  NOTARY PUBLIC #68711 Mathan C. Coltrane by Betty M. Coltrane  Seal or stamp) ATE OF WASHINGTON Print registered owner name  COMMISSION EXPIRES FOR 15th Evans  MARCH 20, 2023 Notary printed of stamped name  Motary signature 3/20/237				<i>r</i> -	· .	~ ~ ~ ~	K		
(Seal or stamp) ATE OF WASHINGTON Eript registered owner name  COMMISSION EXPRESS OF 13ty Evans  MARCH 20, 2023 Notary printed of stamped name  Escrew 3th 15th 17th 18th 18th 18th 18th 18th 18th 18th 18	2 CHR	ISTYFU	oneganistika George		1	5 27	2023		
COMMISSION EXPRES OF 13 Formation of stamped name  MARCH 20, 2023 Notary printed of stamped name  Motary signature  3/20/23 7	NOTAR	Y PUBLIC	#68111 <b>.0</b> 0		,	Dott	1- 1- 0		
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Residence of Escret of and 3/20/2023	COMM	SSION EX	PIRES 🚮	hristy	EVANS	X/			
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	1 1000000000000000000000000000000000000	mai mari maka di di ta	Title				ty office number or notary expiration		

Manufactured home TPO/Plate or Vehicle Identification number (VIN) FLE2100R21-21689 A&B

Title Company Certification			
PRINT or TYPE Name of person signing	Title company name		
Christy Evans	Clark County Title Company		
Position Escrow Officer	(Area code) Phone number (360) 694-4722		
Escrow Officer	(300) 094-4722		
declare that the legal description of the land and ownersl	hip is true and correct according to the real property records.		
X/	2117123		
Signature			
Building Permit Office Certification			
certify that			
the manufactured home has been affixed to the real page abuilding permit has been issued for this purpose and the			
PRINT or TYPE Name of person signing	Building permit office Building permit number.		
Arnoid Dell	Stevenson BP 22/148		
Position 7	(Area code) Phone number		
Dulaing Official	549 43139		
()	3/4/23		
Signature	e pate/		
Signature of Legal Owner(s)	7		
	1		
Signature of legal owner indicates consent for Eliminatio	n of Title or Removal from real property.		
$\mathbf{Y}$			
Zegal ow	ner, sighature Title, if signing for a business		
X Bo	MM		
Čeg <b>a</b> l ow	right signature Title, if signing for a business		
Notarization/Certification State of Wash, na	ton, County of Clark		
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TOHRISTY EVANS Staned or attested before	7		
Seal or Samp) ARY PUBLIC #6571 by Nathan C. C	Coltrare by betty M. Col trave		
BSTATE OF WASHINGTON Print legal owner name	Prior legal owner name		
COMMOSSION EXPOSS Notary printed or stamp	ed name Notary signature 3/2012029		
R MARCH 20, 2013 BEKROW 3	allu		
Title	Dealer/county office number or notary expiration		
Land Description			
egal description of land			
I at 1 afth a Luthou D. Dialainean and Chaile Dialain	Chart Diet recorded in Peak "2" of Short Diets		
	nson Short Plat, recorded in Book "2" of Short Plats,		
at Page 9, records of Skamania County, Washingto	n.		
Except the North 209 Feet thereof.	•		
•			

Manufactured home TPO/Plate or Vehicle Identification number (VIN) \_\_FLE2100R21-21689 A&B 8 Dealer Report of Sale-Selling dealer complete this section Washington dealer no PRINT or TYPE Dealer name Homes inc eisureland Date of sale Purchase price Tax jurisdiction/Tax rate 10590 7/27/22 Sales Tax Exempt-Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery). I declare under penalty of perjury under the law 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 9 County Auditor/Agent Licensing Office Approval (not for use by subagents) County office/VFS operator no. I declare that the above application appears to be completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form Signature \ Date 10 Title Fees Filing fee Application Mobile home fee Elimination fee Use tax Subagent fees

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

Total fees and tax