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

2023-000342 03/14/2023 03:35 PM

Continued on next page

Request of: COLUMBIA GORGE TITLE

RETURN RECORDED DOCUMENT TO:

Megan Knight 133 Haven Lane Carson, WA 98610

WASHINGTON STATE DEPARTMENT OF LICENSING				Manufactured Home Application					Please check one: ✓ Title Elimination ☐ Transfer in Location		
	actured H										
Title purpose only (TPO)/Plate no. Ye		te no. Year	Year Make 2022 golden/west					ele identification no. (VIN) BO41968OR - AB			
2 Land	· · · · · · · · · · · · · · · · · · ·							T			
Manufactured	home will be		property parcel no	0407230	0090500	Lega	al desc	cription o	on page <u>2</u>		
Lot 5	Bloc		Pla	t name or Sec ARTUNG			E	J	Quarter/Quarter section		
	home physical en Lane, Ca	•		City, State, Z	IP code)	1			Is location mobile home park? Yes No		
	or(s) Regis			ner(s) -/	Additional	names o	on pag	je			
County no.	. (-,		red owners	No. legal		Grantee na			~ //		
Name of regi Megan K				7	*				Washington driver license or UBI no		
Name of add	tional registered Barnhart	downer		J		ership – Joi vivorship ROS)	int tenar Yes		Washington driver license or UBI no		
,	Address (Address, City, State, ZIP code)										
Name of lega	l owner	, carso	n wa	98610					Washington driver license or UBI no		
	itional legal own	er		1		1			Washington driver license or UBI no		
	tress, City State Cardinal L		loor, Ti	gard, OR	97224	1					
I certify ur owner(s) o	nder penalty of this manuf	of perjury actured he	under the	e laws of the	e state of ng informa	Washing tion is tr	ton the	at I am/v d correct	we are the registered		
9-27-	-21			X	Y 1	an i	Hx	ufle	/		
Date and pla	ce (city or count	y) signed		X	stered owner	And S			Title, if signing for a busines		
Date and pla	ce (city or count	y) signed			stered owner			$\leq i$	Title, if signing for a busines		
Notarizatio	n/Certification	on .	State of	Masi	inten	_, County	of <u></u>)k'u	mania		
(Seal or stamp) Signed or attested before me on September 27, 2021 by Megan Knight by Daniel R. Barnhart											
Print registered owner name Print-registered owner name Print-registered owner name Visit (I) Charles								ulli-1 todais			
199			Notai Title	ry printed or st		rier	_and	Notary signature Dealer/con	nature 17, 2022 unty office number or notary expiration		

TD-420-729 (R/10/20)WA Page 1 of 3

	ntification number (VIN)ALB0419680R AB						
Title Company Certification							
PRINT or TYPE Name of person signing Kelli Marshall	Title company name Columbia Gorge Title						
Position Title Officer	(Area code) Telephone no. 509-427-5681						
I certify that the legal description of the land and	d ownership is true and corfect according to the real property records. X Signature Signature						
Building Permit Office Certification							
I certify that							
the manufactured home has been affixed to	the real property as described.						
	pose and the attachment will be inspected upon completion.						
PRINT or TYPE Name of person signing	Building permit office Suiting permit no. 233						
ASSIST. Building O	Ficial (Area code) Telephone no. 3900						
	X 3/4/23 Signature 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2						
Signature of Legal Owner(s)							
(Seal or stages CIAL STAMP CHRISTOPHER COSLEY CONRAD NOTARY PUBLIC - OREGON COMMISSION NO. 1000393	ed or stamped name STARY and And And And And And And And						
Title	Dealer/ county office number or notary expiration						
Land Description Legal description of land							
Lot 5 of the HARTUNG ACRES SUBDIVI	ISION, according to the recorded plat thereof, recorded as County of Skamania, State of Washington.						

Manufactured	d home TPO/Plate or	Vehicle Identificatio	n number (VIN)	ALB0419680	OR - AB			
	Report of Sale – Se							
PRINT or TYPE	Dealer name Uf	M Homes		Washington dealer no. 4329				
Date of sale .	11/30/22 Pui	rchase price 182,3	74 Tax	Tax jurisdiction/Tax rate				
☐ Sales Tax	Exempt - Sale to a C	ertified Tribal member	on the reservat	ion <i>(attach notariz</i>	ed statement of delivery).			
manufacture Clacke Date and place (er penalty of perjury und home is clear of end as, & R 1/25/(city or county) signed	cumbrances except as X Dealer au	shown. Any red	quired sales tax ha				
	Auditor/Agent Lic	ensing Office App						
PRINT or TYPE	Name Ora Zettler		County office/VI		-01			
	the above application on to proceed with the		eted correctly, ar		s sufficient			
10 Title Fe	es	100		4				
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees			
			/ A		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