Skamania County, WA Total:\$206.50 MFHOME Pgs=4

2023-001846 12/18/2023 10:53 AM

Request of: CLARK COUNTY TITLE

00017545202300018460040045

WHEN RECORDED RETURN TO:

Clark County Title Company 1400 Washington Street St 100 Vancouver, WA 98660 File:CL20213

Signature of Requesting Party

DOCUMENT TITLE(S)
Manufactured Home Application/Title Elimination
REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED OR RELEASED:
GRANTOR(S):
Gracie M. Foreman and Andrea G. Truelove
GRANTEE(S):
Umpqua Bank ABBREVIATED LEGAL DESCRIPTION:
Block 8, Lot 28, Subdivision of RELOCATED NORTH BONNEVILLE
TAX PARCEL NUMBER(S):
02 07 20 3 4 2800 00
I am requesting an emergency nonstandard recording for an additional fee as provided in RCW 36.18.010.

I understand that the recording processing requirements may cover up or otherwise obscure some part

of the text of the original document. The fee for non-standard processing is \$50.00.

RETURN RECORDED DOCUMENT TO:

Clark County Title Company 1400 Washington Street #100 Vancouver, WA 98660

	TON STATE DEPAI ENSI						✓ Title Elimination		
For full instructions	on compl	eting this	this form, see Manufactured Home				☐ Transfer in Location		
Application Instruct			730.			⊔	Removal from	m Real Property	
Manufacture Manufacture			7.1						
Title purpose only (TP	O)/Plate no.	Year 2022	GhNM Chump		vidth (feet)		cation no. (VIN)	1213AB	
2 Land									
Manufactured home wi		Real prope	el no. <u>02 07 20</u>	0 3 4 280	l enal	description	on page 2		
Lot 28	Block 8	· · · · · · · ·	Plat name or Sec Relocated N	ction/Towns	nip/Range	dodonption	Quarter/Qua	arter section	
Manufactured home ph 828 Celilo Stree	t; North	Bonnevil	le, WA 98639					nobile home park?	
3 Grantor(s) R	egister	ed/Legal	Owner(s) -	Additiona	I names or	n page			
County no.		registered ow	vners No. legal	owners	Grantee nam	e (if applicable)			
Name of registered ow Gracie M. Fores	man			1			Washington driv	ver license or UBI no.	
Name of additional reg Andrea G. True	love	1		of SL	irvivorshin	tenants w/right	Washington driv	ver license or UBI no.	
Address (Address, City 828 Celilo Stree			le, WA 98639				J	9	
Name of legal owner	. 1					77.7	Washington driv	ver license or UBI no.	
Umpqua Bank									
Name of additional legal 6610 SW Cardin		Suite 100			1	J	Washington driv	ver license or UBI no.	
Address (Address, City Tigard, OR 9722		ode)			1				
I certify under pen owner(s) of this m	alty of pe anufactur	rjury unde ed home a	r the laws of the and the foregoir	e state of ng informa	Washingto	on that I am/ e and correc	we are the reg t.	gistered	
5/13/21	Vancou	vec W/	7 X	gracia	Forem	an			
Date and place (city or	county) sign	ed UVV	WA X(teled dwner	signatura	Ove		signing for a business	
Date and place (city or Notarization/Certifi			14/14	tered owner	signature _, County o	, <u>Clim</u>	Little, if s	signing for a business	
CHERYL M	IONAHA	Sig	red or attested b			M_{A}^{3}	3001		
(See NOTARY PUL STATE OF VI	4SHMG+	JN 🌡 📑 i	Frind revistered own	I JUY	brain Nuhan		tered owner name	ruciose	
COMMISSIO JUNE 9			Notary primed or st	amped nam	е	Notary sig	CM WC)3	
100 700 (0)		7	litle \	<u> </u>				r or notary expiration	
ГD-420-729 (R/10/20)WA Pag	je 1 of 3						Contin	nued on next page	

245.00P. H. A101213AB Manufactured home TPO/Plate or Vehicle Identification number (VIN) 4 Title Company Certification PRINT or TYPE Name of person signing Title company name Clark County Title Company Position (Area code) Telephone no. (360)694-4722 I certify that the legal description of the land and ownership is true and correct according to the real property records. Signature Date 5 Building Permit Office Certification lacktriangledown 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 OF TYPE Name of person s Building permit office Building pen Signature 6 Signature of Legal Owner(s) Signature of legal owner indicates consent for Elimination of Fig. Reprove from real property. Legal owner signature litle, if signing for a business Legal owner signature Title, if signing for a business State of Oregon County of Washing Notarization/Certification Signed or attested before me on Kcb Glenn (SOFFICIAL STAMP OPHIA CALLISTA FOSTER OTARY PUBLIC - OREGON Notary printed or stamped name **COMMISSION NO. 1006699** MY COMMISSION EXPIRES DECEMBER 03, 2024 Dealer/county office number or notary expiration 7 Land Description Legal description of land Lot 28 of Block 8 of The Plat of Relocated North Bonneville, recorded in Book "B" of Plats, page 16, Auditor's File No. 83466. Also recorded in Book "B" of Plats, page 32, Auditor's File No. 83429, records of Skamania County, Washington.

Manufactured home TPO/Plate or Vehicle Identification number (VIN) 25.00. H.A.10121346

8 Dealer Re	port of Sale –	Selling dealer complete	this section						
PRINT or TYPE D Columbia G	ealer name orge Affordable		Washington dealer no. 602018297						
Date of sale 08/17/2022		Purchase price 120,048.10	Tax juris 7.7%	Tax jurisdiction/Tax rate 7.7%					
☐ Sales Tax E	xempt – Sale to a	a Certified Tribal member	on the reservation	(attach notariz	red statement of delivery).				
manufactured 8 17 36 Date and place (cit	home is clear of e	Dealer au	thorized signature	red sales tax ha	as been collected.				
9 County Auditor/Agent Licensing Office Approval (not for use by subagents)									
PRINT or TYPE N	ame Kuit	im Mosur	County office/VFS of	perator po					
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 Signature Date									
10 Title Fees	3		- ·		_				
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