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RETURN RECORDED DOCUMENT TO:

Kristina Sexton  
348 Ashley Dr  
Haines City FL  
33844



WASHINGTON STATE DEPARTMENT OF

LICENSING

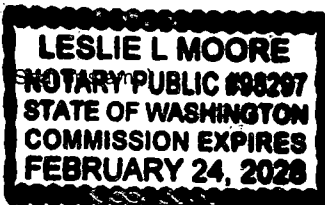
**Manufactured Home  
Application**

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	Make	Length/Width (feet)	Vehicle identification no. (VIN)
	2022	CMHM	X	HER0333920RAB
<b>2 Land</b>				
Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property Tax parcel no. 0308173018 0400 Legal description on page 2		
Lot	Block	Plat name or Section/Township/Range		Quarter/Quarter section
Manufactured home physical location (Street address, City, State, ZIP code) 303 BROOKS RD CARSON WA 98610				Is location mobile home park? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>3 Grantor(s) Registered/Legal Owner(s)</b> —Additional names on page _____				
County no.	No. registered owners	No. legal owners	Grantee name (if applicable)	
	2	2		
Name of registered owner WILLIAM LEONARD SEXTON			Washington driver license or UBI no.	
Name of additional registered owner KRISTINA LYNN SEXTON			Washington driver license or UBI no.	
Address (Address, City, State, ZIP code) 348 Ashley Dr. Haines City FL 33844			Ownership—Joint tenants w/right of survivorship (JTROS) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Name of legal owner WILLIAM LEONARD SEXTON			Washington driver license or UBI no.	
Name of additional legal owner KRISTINA LYNN SEXTON			Washington driver license or UBI no.	
Address (Address, City, State, ZIP code) 348 Ashley Dr. Haines City FL 33844				
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.				
Stevenson Wa 6/11/2024		X [Signature] Registered owner signature Title, if signing for a business		
Stevenson Wa 6/11/2024		X [Signature] Registered owner signature Title, if signing for a business		
Notarization/Certification				
State of Washington		County of Skamania		
Signed or attested before me on 6/11/2024				
by William Leonard Sexton		by Kristina Lynn Sexton		
Print registered owner name		Print registered owner name		
Leslie L Moore		X [Signature] Notary		
Notary printed or stamped name		Notary signature		
Notary		2/24/2028		
Title		Dealer/county office number or notary expiration		



Manufactured home TPO/Plate or Vehicle Identification number (VIN) \_\_\_\_\_

**4 Title Company Certification**

PRINT or TYPE Name of person signing

Ille Marshall

Title company name

Columbia Gorge Title

Position

Title officer

(Area code) Phone number

509-427-5681

I declare that the legal description of the land and ownership is true and correct according to the real property records.

☒

Signature

Date

6/11/2024

**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

Arnold Bell

Building permit office

Stevenson

Building permit number

Position

Building Official

(Area code) Phone number

509-427-3900

Signature

Date

☒

6/11/24

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

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

Legal owner signature

Title, if signing for a business

Legal owner signature

Title, if signing for a business

Notarization/Certification.

State of Washington, County of Skamania

Signed or attested before me on

6/11/2024

by William Leonard Sexton

by Kristina Lynn Sexton

Print legal owner name

Print legal owner name

Leslie L Moore

Leslie L Moore

Notary printed or stamped name

Notary signature

Notary

and

2/24/2028

Title

Dealer/county office number or notary expiration

**7 Land Description**

Legal description of land

A tract of land located in the Southwest Quarter of the Southwest Quarter of Section 17, Township 3 North, Range 8 East of the Willamette meridian, in the County of Skamania, State of Washington, described as follows:  
Lot 2 of the SEXTON Short Plat SP-24-01, Recorded as Auditor File No. 2024000788, Skamania County Records.

Manufactured home TPO/Plate or Vehicle Identification number (VIN) \_\_\_\_\_

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

PRINT or TYPE Dealer name		Washington dealer no.
Date of sale	Purchase price	Tax jurisdiction/Tax rate
<input type="checkbox"/> Sales Tax Exempt—Sale to a Certified Tribal member on the reservation ( <i>attach notarized statement of delivery</i> ).		
<i>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.</i>		
_____ Date and place (city or county) signed		<b>X</b> _____ Dealer authorized signature

**9 County Auditor/Agent Licensing Office Approval** (*not for use by subagents*)

PRINT or TYPE Name	County office/VFS operator no.
<i>Kaitlyn Wagner</i>	<i>30-01</i>
<i>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.</i>	
<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