



MOBILE HOME REAL ESTATE EXCISE TAX AFFIDAVIT

Submit to County Treasurer of the county in which property is located.

Chapter 82.45 RCW Chapter 458-61A WAC

This form is your receipt when stamped by cashier.

FOR USE WHEN TRANSFERRING TITLE TO MOBILE HOME ONLY

PLEASE TYPE OR PRINT INCOMPLETE AFFIDAVITS WILL NOT BE ACCEPTED

REGISTERED OWNER Name: Josephine J. Leeper Street: 2740 Mayfair Drive Apt 4 City: Lewiston State: ID Zip Code: 83501

LOCATION OF MOBILE HOME Name: Street: 2131 Valleyview Drive City: Clarkston State: WA Zip Code: 99403

NEW REGISTERED OWNER Name: Craig Martinson Jenell Martinson Street: 2133 Valleyview Drive City: Clarkston State: WA Zip Code: 99403

LEGAL OWNER Name: Street: City: State: Zip Code:

PERSONAL PROPERTY PARCEL or ACCOUNT NO. 1-252-00-002-0000-0000 LIST ASSESSED VALUE(S): \$ 14,000.00

REAL PROPERTY PARCEL or ACCOUNT NO. 1-252-00-002-0000-0000 LIST ASSESSED VALUE(S): \$ 56,000.00

Table with 6 columns: MAKE, YEAR, MODEL, SIZE, SERIAL NO. or I.D., REVENUE TAX CODE NO. Row 1: Redmond, 1996, Riverview

Date of Sale: 04/19/2019 Taxable Sale Price: \$ 14,000.00 Excise Tax: State \$ 179.20 Local \$ 35.00 Total Due: \$ 219.20

0200

AFFIDAVIT I certify under penalty of perjury... Signature of Grantor/Agent: Josephine J. Leeper Name (print): Josephine J. Leeper Date and Place of Signing: 04/19/19 Clarkston, WA

Signature of Grantee/Agent: Craig Martinson Name (print): Craig and Jenell Martinson Date & Place of Signing: 04/19/19 Clarkston, WA

TREASURER'S CERTIFICATE I hereby certify that property taxes due ASOTW County on the mobile home described hereon have been paid to and including the year 2019 Date: 4-19-19 County Treasurer or Deputy: [Signature]

If, in selling (or otherwise transferring ownership of) a mobile home which possesses a tax lien, the seller does not inform the buyer (new owner) of such a lien, the seller is guilty of deliberate deception as it applies to Fraud and/or Theft as defined in Title 9 and 9A RCW (RCW 9.45.060, RCW 9A.56.010 (4d), and RCW 9A.56.020).

THIS SPACE - TREASURER'S USE ONLY

PAID

APR 19 2019

ASOTIN COUNTY TREASURER

REV 84 0003e (4/9/08) COUNTY TREASURER ATEC CR # 27367E

052107



# AFFIDAVIT OF LOSS RELEASE OF INTEREST

LICENSE/REGISTRATION NUMBER	YEAR 1996	MAKE Redmond	SERIES AND BODY
VEHICLE IDENTIFICATION NUMBER (VIN) OR VESSEL HULL IDENTIFICATION NUMBER (HIN) 11823455A			TITLE NUMBER

Any person who knowingly makes a false statement of a material fact shall be guilty of a felony. Upon conviction they shall be punished by a fine of up to \$5,000 and/or imprisonment for up to ten years. (RCW 46.12.210)

<b>L O S S</b>	By my signature I swear and say that the (CHECK THE APPLICABLE BOX)			
	<input checked="" type="checkbox"/> TITLE	<input type="checkbox"/> REGISTRATION	<input type="checkbox"/> TAB	<input type="checkbox"/> DECAL
issued to me, is not now in my possession because it was (CHECK THE APPLICABLE BOX)				
<input checked="" type="checkbox"/> LOST	<input type="checkbox"/> STOLEN	<input type="checkbox"/> DESTROYED	<input type="checkbox"/> MUTILATED	
Signature: <i>Josephine J. Leeper</i>		Printed Name (Position, if signing for business or organization) _____ DOL Customer Account Number *		

	<b>NOTARIZATION / CERTIFICATION</b>		
	State of Washington County of <u>WA</u>	Signed or attested before me on <u>4-19-19</u>	
by <u>Josephine J. Leeper</u>	Signature: <i>Lacey D. Meredith</i>		Notary/Agent Signature
Notary's Name (PRINTED or STAMPED) <u>Lacey D. Meredith</u>			Dealer No. OR _____
Title <u>Notary</u>	AND: County / Office No. OR _____		Notary Expiration Date <u>10-20-2021</u>

<b>R E L E A S E</b>	By my signature I release my interest as Legal Owner of the vehicle/vessel described above. (NOTE: This Release of Interest must be signed by ALL Legal Owner(s), with signatures notarized; use additional forms if necessary.)		
	<input checked="" type="checkbox"/>	Signature of person releasing interest _____	Printed Name (Position, if signing for business or organization) _____ DOL Customer Account Number *
	<input checked="" type="checkbox"/>	Signature of person releasing interest _____	Printed Name (Position, if signing for business or organization) _____ DOL Customer Account Number *
<b>NOTE: A Vehicle Odometer Disclosure (Form TD-420-006) is required when transferring a vehicle that is nine (9) years old or newer, unless otherwise exempt. The new owner <u>MUST</u> apply for title within 15 days. Failure to do so will result in monetary penalty assessment.</b>			

<b>GROSS WEIGHT LICENSE</b>		
(AGENT: You must verify gross weight license. Your signature certifies that the information was verified.)		
I authorize this Gross Weight License to be transferred to the new owner and remain with the vehicle described above:		
<input checked="" type="checkbox"/>	Signature _____	Printed Name (Position, if signing for business or organization) _____ DOL Customer Account Number *

	<b>NOTARIZATION / CERTIFICATION</b>		
	State of Washington County of _____	Signed or attested before me on _____	
by _____	Signature _____		Notary/Agent Signature
Notary's Name (PRINTED or STAMPED) _____			Dealer No. OR _____
Title _____	AND: County / Office No. OR _____		Notary Expiration Date _____

\* The DOL CUSTOMER ACCOUNT NUMBER is found on the Washington Driver's License or Identification Card (12 digits)- or if the owner is a business or organization, is the UBI number found on the Master Business License or Business License and Registration Certificate (9 digits).

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3600 or TTY (360) 664-8885.

52107

# Vehicle Title Application

Vehicle - Please type or print plainly

For title purposes only

Vehicle identification no (VIN) 11823455A			Condition <input type="checkbox"/> New <input checked="" type="checkbox"/> Used		Vehicle type Mobile/Mfg home		Primary use type Mobile home		Fuel type		
Model year 1996		Make Redmond		Model Riverview			Trim		Body style		Motorcycle style
GV Weight Rating		Scale wt	Gross weight	Mo GWT	Seats	Color #1		Color #2		Equip no	Purchase price \$14,000.00
Wheels	Rental no	Fleet	Engine (MC)	Motor home/Cycle/WATV eng serial no			Length	Width	Quick title <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Discover pass <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Park donation <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

**Registered owner** - For additional owners, attach sheet with name, driver license/ID/TIN/EIN/UBI number, expiration date, and phone information. Washington primary residence street address or Washington principal place of business street address is required on the vehicle record. For exceptions, see **Primary Residence Address Exception**, form 420-004.

<b>1</b>	Owner type Individual	ID type Driver license	Driver license/ID/TIN/EIN/UBI no		Expiration date	Phone type	(Area code) Phone no (208) 798-9536	
Registered owner name (Last, First, Middle, Suffix) or Business name Martinson, Craig								
Washington primary residence address (if an individual) or Washington principal place of business address (if a business) 2131 Valleyview Drive, Clarkston, WA 99403								
Mailing address, if different than residence address (Street address or PO Box, City, State, ZIP code) or exception address 2133 Valleyview Drive, Clarkston, WA 99403								
One-time mailing address, if applicable								

Paperless renewal option <input type="checkbox"/> Notify me by email when it's time to renew my vehicle					Email address		
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<b>2</b>	Owner type Individual	Joint tenants w/right of survivorship <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	ID type Driver license		Driver license/ID/TIN/EIN/UBI no		Expiration date		
Registered owner name (Last, First, Middle, Suffix) or Business name Martinson, Jenell								Phone type	(Area code) Phone no (208) 798-9536

**Legal owner/Lienholder** - Fill out if different than registered owner. For additional legal owner/lienholders, attach sheet with name, driver license/ID/TIN/EIN/UBI number, expiration date, and address information.

Name of legal owner/lienholder (Last, First, Middle initial or Business name)								
Legal owner/Lienholder type		ID type	Driver license/ID/TIN/EIN/UBI no			Expiration date	ELT participant <input type="checkbox"/> Yes <input type="checkbox"/> No	
Mailing address (Street address or PO Box, City, State, ZIP code)								

**Dealer**

Dealer type	Dealer no	Dealer name		Sale date	Delivery date	Vehicle status <input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Prev titled	
I certify that this information is correct. The vehicle is clear of encumbrances except as shown. Any required sales tax has been collected.						Dealer authorized signature <b>X</b>	

Anyone who knowingly makes a false statement may be guilty of a felony under state law and upon conviction shall be punished by a fine, imprisonment, or both. I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

<b>X</b>	Signature of registered owner <u>Craig Martinson</u>		Title, if signing for business Clarkston		<b>X</b>	Signature of registered owner <u>Jenell Martinson</u>		Title, if signing for business Clarkston	
Date and place signed 4-19-19		Date and place signed 4-19-19		Date and place signed		Date and place signed		Date and place signed	

**Notarization/Certification** - You don't need your signature notarized if you sign in front of a vehicle licensing agent, who can certify your signature.

State of	WA	County of	ASotin
Signed or attested before me on	4-19-19	by	Craig & Jenell Martinson
Name of person signing this document			
Notary/Agent/Subagent signature	<u>Lacey D. Meredith</u>		
Notary printed or stamped name	Lacey D. Meredith		
Title	Notary	and	10-20-2021
Dealer or county/office number or notary expiration date			

