

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.
Used for sales on or after Jan. 1, 2020.

FOR USE WHEN TRANSFERRING TITLE TO MOBILE HOME ONLY

PLEASE TYPE OR PRINT
INCOMPLETE AFFIDAVITS WILL NOT BE ACCEPTED

REGISTERED OWNER (Seller)

Name: SHARON BAKER
Street: 1722 Lambert DR #1
City: CLARKSTON WA 99403
Phone number: 208 413 0043

NEW REGISTERED OWNER (Buyer)

Name: BAKERS Lighthouse Prop LLC
Street: 1722 Lambert DR #1
City: CLARKSTON WA 99403
Phone number: 208 413 0043

LOCATION OF MOBILE HOME

Name: _____
Street: 1722 Lambert DR #2
City: CLARKSTON WA 99403

LEGAL OWNER

Name: _____
Street: _____
City: _____ State: _____ Zip code: _____

PERSONAL PROPERTY PARCEL or ACCOUNT NO. 5-001-14-008-0001-0020
LIST ASSESSED VALUE(S): \$ 22,300

REAL PROPERTY PARCEL or ACCOUNT NO. _____
LIST ASSESSED VALUE(S): \$ _____

MAKE	YEAR	MODEL	SIZE	SERIAL NO. or I.D.	REVENUE TAX CODE NO.
FTWD	1992	TL	66x14	IDFLM04A 14231BM	

Is this property predominantly used for timber (as classified under RCW 84.34 and 84.33) or agriculture (as classified under RCW 84.34.020)?
See ETA 3215 Yes No
Date of Sale 9-22-20

Taxable Sale Price\$
Excise Tax: State.....\$ 0.00
Select Location Local.....\$ 0.00
Delinquent Interest: State.....\$ 0.00
Local.....\$ 0.00
Delinquent Penalty\$ 0.00
Subtotal\$ 0.00
State Technology Fee\$ 5.00
Affidavit Processing Fee.....\$ 5.00
Total Due.....\$ 10.00

If exemption claimed, WAC number & title:
WAC No. (Sec/Sub) 458-61A-21(5)
WAC Title MERCHANDISE - LLC

A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX.

AFFIDAVIT

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Signature of Seller/Agent Sharon Baker

Name (print) SHARON BAKER

Date and Place of Signing: 9-22-20 Asotin

Signature of Buyer/Agent Sharon Baker

Name (print) SHARON BAKER

Date & Place of Signing: 9-22-20 Asotin

TREASURER'S CERTIFICATE

I hereby certify that property taxes due Asotin
County on the mobile home described hereon have been paid to and including the year 2020
9/22/20 _____
Date County Treasurer or Deputy

0200
P058096

SEP 22 2020

ASOTIN COUNTY
TREASURER

If, in selling (or otherwise transferring ownership of) a mobile home, 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 9A.56.060, RCW 9A.56.010 (4d), and RCW 9A.56.020).

CERTIFICATE OF TITLE

VEHICLE IDENTIFICATION NUMBER IDFLM04A14232BM		YEAR 1992	MAKE FTWD	BODY HS	MODEL TL	DESCRIPTION MFRD HM
2ND VEHICLE IDENTIFICATION NUMBER		ODOMETER READING EXEMPT		DATE		
TITLE NUMBER D92354175	PRINT DATE 10/06/2006	WEIGHT	LENGTH 66	WIDTH 14	HULL HORSEPOWER	PROPULSION
OWNER'S NAME AND ADDRESS BAKER, SHARON L 1018 ALDER AVE LEWISTON, ID 83501				OTHER PERTINENT DATA BROADMORE		



Assignment of Title

Federal and state law requires that you state the mileage when transferring ownership of a motor vehicle. Failure to complete or providing a false statement may result in fines and/or imprisonment.

1 ODOMETER READING - Reading is actual unless indicated otherwise. (NO TENTHS) _____ DATE _____ <input type="checkbox"/> In Excess of Mechanical Limits <input type="checkbox"/> Exempt <input type="checkbox"/> Not Actual - Warning: Odometer Discrepancy <input type="checkbox"/> No Device	5 PURCHASER'S PRINTED NAME(S) _____ 6 ADDRESS _____ 7 CITY STATE ZIP _____
2 DATE SOLD _____ SELLING PRICE _____ 3 SELLER'S OR REPRESENTATIVE'S PRINTED NAME(S) _____	8 I certify, to the best of my knowledge, that the odometer reading reflects the actual mileage, unless otherwise indicated. I also hereby release my interest and transfer ownership to the named purchaser. I understand that I must file a release of liability statement within five days of delivering the vehicle to the purchaser. SELLER'S OR REPRESENTATIVE'S SIGNATURE: _____ 9 PURCHASER'S OR REPRESENTATIVE'S SIGNATURE: _____ 2nd PURCHASER'S OR REPRESENTATIVE'S SIGNATURE (of representative's printed name) _____

Lienholder Section

FIRST LIEN NONE RECORDED 09/19/2006	SECOND LIEN _____ 10 SIGNATURE RELEASING LIEN DATE _____ 11 NEW LIENHOLDER'S NAME / LIEN-CREATION DATE _____ 12 ADDRESS _____ 13 CITY STATE ZIP _____
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08-047W

\$2.00 Fee

NOTICE OF RELEASE OF LIABILITY

\$2.00 Fee

PLEASE PRINT CLEARLY — ALL INFORMATION MUST BE COMPLETE — NOTIFICATION BY SELLER/TRANSFEROR IS MANDATORY

Vehicle or Hull Identification Number (VIN or HIN) IDFLM04A14232BM	Year 1992	Make FTWD	Body Style HS	Title Number D92354175
Seller's/Transferor's Full Name: _____		Daytime Phone Number: _____		
Address: _____		City: _____	State: _____	Zip: _____
Odometer: _____		Selling Price: \$ _____		
Date Delivered to Purchaser/Transferee: _____				
Purchaser's/Transferee's Full Name: _____				
Address: _____		City: _____	State: _____	Zip: _____

I/we hereby request that the Idaho Transportation Department mark its records to indicate that the vehicle or vessel described above has been transferred. However, I/we understand that the title record will remain in my/our name(s) until a new Idaho Certificate of Title is applied for and issued, recording the name(s) of the new owner(s).

X /

Signature of Seller(s)/Transferor(s)

— SEE REVERSE SIDE FOR MAILING/PAYMENT INSTRUCTIONS —

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