

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: Mary Loomis

Street: 2235 Petchline Drive

City: Clarkston State: WA Zip code: 99403

Phone number: _____

LOCATION OF MOBILE HOME

Name: Carolly McGlothlen

Name: Darryl McGlothlen

Street: 2015 6th Avenue, Unit 319C

City: Clarkston State: WA Zip code: 99403

NEW REGISTERED OWNER (Buyer)

Name: Carolly McGlothlen

Name: Darryl McGlothlen

Street: 2015 6th Avenue, Unit 319C

City: Clarkston State: WA Zip code: 99403

Phone number: _____

LEGAL OWNER

Name: Carolly McGlothlen

Name: Darryl McGlothlen

Street: 2015 6th Avenue, Unit 319C

City: Clarkston State: WA Zip code: 99403

PERSONAL PROPERTY
PARCEL or ACCOUNT NO. 5-041-35-002-0002-3190
LIST ASSESSED VALUE(S): \$ 500.00

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

MAKE	YEAR	MODEL	SIZE	SERIAL NO. or I.D.	REVENUE TAX CODE NO.
MARLE	1974	70/1413E		S40443	0200

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 04/28/2023

Taxable Sale Price\$ 35,000.00
Excise Tax: State.....\$ 385.00
County Local.....\$ 87.50
Delinquent Interest: State.....\$ 0.00
0.0025 Local.....\$ 0.00
Delinquent Penalty\$ 0.00
Subtotal\$ 472.50
State Technology Fee\$ 5.00
Affidavit Processing Fee.....\$ 0.00
Total Due.....\$ 477.50

If exemption claimed, WAC number & title:
WAC No. (Sec/Sub) _____
WAC Title _____

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

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 2023
5-1-23 _____
Date County Treasurer or Deputy

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 Mary Loomis by Debra Church POA

Name (print) Mary Loomis By Debra Church, POA

Date and Place of Signing: 4/28/23 Clarkston

Signature of Buyer/Agent Carolly McGlothlen

Name (print) Carolly McGlothlen

Date & Place of Signing: 4/28/23 Clarkston

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).

PAID

MAY 01 2023

ASOTIN COUNTY
TREASURER

THIS SPACE - TREASURER'S USE ONLY

STATE OF WASHINGTON VEHICLE CERTIFICATE OF OWNERSHIP

CERTIFICATE NUMBER
0432402807

LICENSE NUMBER	DATE OF APPLICATION	MODEL YEAR	MAKE	POWER/USE	SERIES & BODY STYLE
@18693	11/19/2004	1974	MARLE	MOB	70/1413E
VEHICLE IDENTIFICATION NUMBER (VIN)	FLEET/EQUIP. NUMBER	SCALE WT.	MILEAGE	ODOMETER CODE	
S40443			000000	EXEMPTION	
COMMENTS/ BRANDS			PRIOR TITLE STATE	PRIOR TITLE NUMBER	
10000-2004			WA	2509905103	

REGISTERED OWNER
SAME AS LEGAL OWNER BELOW

SIGNATURE(S) OF REGISTERED OWNER(S) BELOW, HEREBY RELEASES ALL INTEREST IN VEHICLE DESCRIBED ABOVE.

BY _____ DATE OF SALE _____
REGISTERED OWNER SIGNATURE

BY _____ DATE OF SALE _____
REGISTERED OWNER SIGNATURE

SALE PRICE _____
SIGNATURE(S) OF LEGAL OWNER(S) BELOW, HEREBY RELEASES ALL INTEREST IN VEHICLE DESCRIBED ABOVE.

BY _____ DATE RELEASED _____
FIRST LEGAL OWNER-SIGNATURE & TITLE

BY _____ DATE RELEASED _____
SECOND LEGAL OWNER-SIGNATURE & TITLE

LEGAL OWNER
LOMIS, EARL A
LOMIS, MARY A
2015 6TH AVE SPC 319C
CLARKSTON WA 99403-1544

LEGAL OWNERS: When lien is satisfied, release entered by signing above and handing this document to County Auditor or Agent on this paper only. Failure to properly return and forward this document within 10 days after lien is satisfied may result in monetary penalty to the debtor, pursuant to RCW 46.12.170. TRANSFEREE/BUYER MUST APPLY FOR TRANSFER OF OWNERSHIP WITHIN 10 DAYS FROM DATE OF DELIVERY, TO AVOID PENALTY. (SEE REVERSE FOR ADDITIONAL INFORMATION.)



10/04 0045972 AB
10-420-002 0045972 AB

KEEP IN SAFE PLACE

ANY INFORMATION FOR CASH REVENUE IS THIS TITLE

56030

AN ODOMETER DISCLOSURE MUST BE COMPLETED FOR TRANSFER OF ALL VEHICLES LESS THAN TEN YEARS OLD. THIS SECTION IS NOT VALID UNLESS FULLY COMPLETED AND IS NOT AN APPLICATION TO TRANSFER OWNERSHIP.

ASSIGNMENT BY REGISTERED OWNER

Federal and state law requires that you STATE THE MILEAGE in connection with the transfer of ownership. Failure to complete odometer statement or providing a false statement may result in fines and/or imprisonment.

I certify to the best of my knowledge that the ODOMETER READING as shown below is : (CHECK ONE)



ODOMETER READING (IN MILES)

NO
TENTHS

- 1. The mileage stated is the ACTUAL MILEAGE of the vehicle.
- 2. The mileage stated is in EXCESS OF ITS MECHANICAL LIMITS.
- 3. The odometer reading is NOT ACTUAL MILEAGE. — WARNING — AN ODOMETER DISCREPANCY EXISTS BETWEEN THE ODOMETER READING AND THE ACTUAL MILEAGE.

Transferee/buyer: unless licensed dealer, must transfer ownership within 15 calendar days from the date of delivery, I/we warrant this Certificate of Ownership and certify that the vehicle described on the face of this certificate of ownership has been purchased by the following:

Date of Delivery
/ /

Signature of Transferee/Buyer

Signature of Transferor/Seller

Hand-Printed Name of Transferee/Buyer

Hand-Printed Name of Transferor/Seller

Address of Transferee/Buyer

Address of Transferor/Seller

Customer Account Number of Transferee/Buyer:
(Washington Driver's License Number (PIC) or Unified Business Identifier (UBI))

LIENHOLDER OF TRANSFEREE/BUYER (IF APPLICABLE)

Name of Lienholder

Address of Lienholder

Customer Account Number of Lienholder :
(Washington Driver's License Number (PIC) or Unified Business Identifier (UBI))

FOR DEPARTMENT USE ONLY:

56020