

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  
State: WA Zip code: 99403  
City: CLARKSTON State: WA Zip code: 99403  
Phone number: 208-413-0043

NEW REGISTERED OWNER (Buyer)

Name: BAKERS Lighthouse PRO LLC  
Street: 1722 Lambert DR #1  
City: CLARKSTON WA 99403  
State: WA Zip code: 99403  
City: CLARKSTON State: WA Zip code: 99403  
Phone number: 208-413-0043

LOCATION OF MOBILE HOME

Name: BAKERS Lighthouse PRO LLC  
Street: 1722 Lambert DR #1  
City: CLARKSTON WA 99403  
State: WA Zip code: 99403  
City: CLARKSTON State: WA Zip code: 99403

LEGAL OWNER

Name: \_\_\_\_\_  
Street: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

PERSONAL PROPERTY PARCEL or ACCOUNT NO. 5-00474-008-0001-0010  
LIST ASSESSED VALUE(S): \$ 95,700

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

MAKE	YEAR	MODEL	SIZE	SERIAL NO. or I.D.	REVENUE TAX CODE NO.
LIBERTY	1986		70x14	09L30379	

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) 458-101A-21(5)  
WAC Title mere change

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

TREASURER'S CERTIFICATE  
I hereby certify that property taxes due ASOTIN SEP 22 2020  
County on the mobile home described hereon have been paid to and including the year 2020 ASOTIN COUNTY TREASURER  
9/22/20 Sharon Baker  
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 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

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

053494



STATE OF WASHINGTON  
**Vehicle Certificate of Ownership (Title)**

Certificate Number

1127835306

License number **+684942** Vehicle identification number (VIN) **09L30379** Year **1996** Make **LIBER** Model \_\_\_\_\_ Style \_\_\_\_\_ Series/Body **70X14**

Date issued **10/05/2011** Odometer miles **000000** Odometer status **E** Fleet number \_\_\_\_\_ Equipment number \_\_\_\_\_ Fuel type \_\_\_\_\_

Use class **MOB** Scale weight **00000** Gross weight \_\_\_\_\_ Vehicle color **BLUE, LIGHT** Prior title state **ID** Prior title number \_\_\_\_\_

Comments  
**9000-2011**

Brands

Sale price \$ \_\_\_\_\_

Date of sale \_\_\_\_\_

**Legal owner:** To release your interest, sign below, then give this title to the registered owner/transferee or send it to a vehicle licensing office with the proper fee. You may be liable to the registered owner/transferee for penalties if you do not release interest within 10 days after proper demand.

Legal owner  
**BAKER, SHARON**  
**1786 WOODSIDE ROAD**  
**WINCHESTER, ID 83555**

Registered owner  
**SAME AS LEGAL OWNER**

Signature of legal owner releases all interest in the vehicle described above

Date

Signature of registered owner releases all interest in the vehicle described above

Date

Signature of legal owner releases all interest in the vehicle described above

Date

Signature of registered owner releases all interest in the vehicle described above

Date

I certify that the records of the Department of Licensing show the persons named herein as registered owners and legal owners of the vehicle described.

Director, Department of Licensing

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

I certify, to the best of my knowledge, the odometer reading is:  (no tenths) Transfer date \_\_\_\_/\_\_\_\_/\_\_\_\_  
Odometer reading in miles  
This reading is (check one):  the actual mileage of the vehicle  in excess of its mechanic limits  not the actual mileage.

Signature of transferee/buyer

PRINTED name of transferee/buyer

Address of transferee/buyer

Signature of transferor/seller

PRINTED name of transferor/seller

Address of transferor/seller

Assignment by registered owner

Keep in a safe place. Any alteration or erasure voids this title.

53494