

Title ~~to~~ Elim <sup>5</sup>/<sub>2</sub>/<sub>7</sub>

**Manufactured Home:** **9208030065**

Year 1978 Make KENTWOOD Width 14' Length 52'

Vehicle Identification Number KW 6500

**Registered Owners:**

Names STEPHEN J & ELLEN JO ALLEN Signatures Stephen J Allen, Ellen Jo Allen

**Legal Owners:**

P.O. Box 36 ANACORTES, WA 98003  
 Names STEPHEN J & ELLEN JO ALLEN Signatures Stephen J Allen, Ellen Jo Allen

\*SIGNATURES OF OWNERS INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 RCW AND INDICATE INTENT TO PERFECT INTEREST IN THE MANUFACTURED HOME AS REAL PROPERTY WITH THE LAND HE/SHE/THEY OWN, AND TO WHICH THIS IS/IS BEING AFFIXED.

**Land to Which Manufactured Home is Being Affixed:**

Property Tax Parcel Number 3822 - 000 - 024 - 0002

Legal Description SKYLINE NO. 6 LOT 24 INCLUDES 1978 MOBILE 52 X 14 SER KW 6500 PC 31

Owners' Names STEPHEN J & ELLEN JO ALLEN Signatures Stephen J Allen, Ellen Jo Allen

\*SIGNATURES OF OWNERS INDICATE CONSENT TO HAVE THE MANUFACTURED HOME ADDED TO THE REAL PROPERTY LISTED ABOVE.

4709 Yorkman St  
 Anacortes  
 98221  
 REQUEST OF  
 STEPHEN & ELLEN  
 ALLEN  
 AUG 13 AM 10:32  
 FILED  
 KERRY MCINTURFF  
 COUNTY AUDITOR

**Building Permit Office Certification:**

I certify that the manufactured home has been affixed to the real property as described above and/or building permit number 7778 has been issued for the purpose of affixing the manufactured home to the land and will be inspected upon completion.

Ed Frank Ed Frank City of Anacortes 7/30/92 (206) 293-1901

NAME SIGNATURE BLDG. PERMIT OFFICE DATE PHONE NUMBER

**County Auditor/Agent Licensing Office Approval: (Not for use by subagents)**

I certify that the above application appears to have been completed correctly, and that the applicant has sufficient documentation to proceed with the recording of this form.

CRYSTAL R. FERRIS Crystal R. Ferris 2901-10 08-03-92

NAME SIGNATURE OFFICE/CAAP OPERATOR NUMBER DATE

**Recording Office:**

I certify that this form has been recorded in the county records.

Cheryl Bergquist Skagit 8-3-92 9208030065

NAME SIGNATURE COUNTY DATE RECORDING NUMBER

Note: Every person who falsifies or intentionally omits material information required in an affidavit is guilty of a gross misdemeanor punishable in accordance with RCW 9A.20.021.

**9208030065**

BK 110 PG 0531