

ISLAND TITLE COMPANY SB-8016 ✓

6/18

9510190069



MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK
'95 OCT 19 AM 11:12
RECORDED AT:
REQUEST OF:

- TITLE OPTIONS
Original
Transfer
Duplicate
Reissue
[X] TITLE ELIMINATION (Complete all but section 3, below)
TRANSFER IN LOCATION (Complete ALL sections below)
REMOVAL FROM REAL PROPERTY (Complete all but section 4, below)

1 MANUFACTURED HOME
YEAR: 1976 MAKE: RIDGW WIDTH/LENGTH: 24/52 VEHICLE IDENTIFICATION NUMBER (VIN): LOS1346XU COLOR #1 TOP OR FRONT: COLOR #2 BOTTOM OR REAR COLOR:

2 LAND
Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.
Land to which the manufactured home is being: [X] AFFIXED [ ] REMOVED
PROPERTY TAX PARCEL NUMBER: 3877-000-129-0000

3 TITLE COMPANY CERTIFICATION
I certify that the legal description of the land and ownership are true and correct.
NAME: TITLE COMPANY/PHONE NUMBER: SIGNATURE: DATE:
NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative.

4 BUILDING PERMIT OFFICE CERTIFICATION
I certify that the manufactured home has been affixed to the real property as described, or the following building permit has been issued for this purpose and will be inspected upon completion.
NAME: Jody Ann Goodman SIGNATURE/TITLE: X Jody Ann Goodman BLDG PERMIT # 94-1489 BLDG PERMIT OFFICE/PHONE NUMBER: 336-9410 DATE: 10-18-95

5 OWNER INFORMATION
COUNTY # INC UNINC NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS
NAME OF FIRST REGISTERED OWNER: MONTEE, SHIELA D.
NAME OF SECOND REGISTERED OWNER:
ADDRESS OF FIRST REGISTERED OWNER: 4394 Mt. Baker Dr.
CITY: Concrete STATE: WA ZIP CODE: 98237
NAME OF FIRST LEGAL OWNER\*: Mellon Mortgage Company
MAILING ADDRESS OF FIRST LEGAL OWNER: 3835 NE Hancock St., Ste. 101
CITY: Portland STATE: OR ZIP CODE: 97212
\* SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:
Anyone who knowingly makes a false statement of a material fact is guilty of a felony...
Registered Owner Signature(s): X Shiela D. Montee (Title)
JANICE L. VERBURG, Notary Public, State of Washington, Commission Expires August 15, 1999

6 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.
NAME: CRYSTAL R. FERRIS SIGNATURE: X Crystal R. Ferris OFFICE/OPS OPERATOR NUMBER: 29-01-10 DATE: 10-19-95

7 RECORDING OFFICE
This form has been recorded in the county records.
RECORDING NUMBER: 9510190069 K 1486 PGO 174 COUNTY: Skagit VOLUME/PAGE: DATE: 10/19/95



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT  
**LEGAL DESCRIPTION OF LAND**

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

- Check type of application:
- Title Elimination
  - Removal From Real Property
  - Transfer In Location

Land: Property Tax Parcel Number 3877-000-129-0000  
3877-000-129-0100

Legal Description:

Lot 129, CEDARGROVE ON THE SKAGIT, according to the plat thereof recorded in Volume 9 of Plats, page 48 through 51, records of Skagit County, Washington.

Situated in Skagit County, Washington.