

ISLAND TITLE SB-9230 ✓



### MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK	FILED AT THE REQUEST OF:
	NAME
	ADDRESS

Please check one

- 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)

<b>1 MANUFACTURED HOME</b>				9606120075
TPOPLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
8052460	1993	GOLDW	27X56	WH12430

<b>2 LAND</b>	PROPERTY TAX PARCEL NUMBER
Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office or it may be typed or printed on an Additional Attachment Form (TD-420-732). Manufactured home will be <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED	351117-C-004-0500

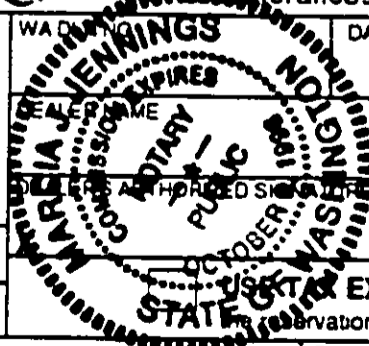
<b>3 TITLE COMPANY CERTIFICATION</b>			
I certify that the legal description of the land and ownership is true and correct per the real property records.			
NAME	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
		X	

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

<b>4 BUILDING PERMIT OFFICE CERTIFICATION</b>			
I certify that the manufactured home has been affixed to the real property as described, or a building permit has been issued for this purpose and the attachment will be inspected upon completion.			BLDG PERMIT #
			94-1035
NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE #	DATE
	Sheryl Walker Permit Tech	336-4410	6/3/96

<b>5 OWNER INFORMATION</b>				FILING FEE
COUNTY # INC UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	
<input type="checkbox"/> <input type="checkbox"/>	2	1		
REGISTERED	NAME OF FIRST OWNER		MARVIN, KENNETH K.	MARV I KK535DE
	NAME OF SECOND OWNER		MARVIN, SUSAN R.	MARV I SR 498PP
	ADDRESS OF OWNER		5972 CASCADE RIVER ROAD	
	CITY	STATE	ZIP CODE	
MARBLEMOUNT	WA	98267	--OR-- if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.	
LIENHOLDER	NAME OF FIRST LEGAL OWNER*		WASHINGTON MUTUAL BANK	
	MAILING ADDRESS OF FIRST LEGAL OWNER		P. O. BOX D	
	CITY	STATE	ZIP CODE	
	MOUNT VERNON	WA	98273	601576388
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE REMOVAL FROM REAL PROPERTY			More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.	
			DEALER'S REPORT OF SALE	
			I certify that this information is correct. The vehicle is clear of all encumbrances except as shown.	

Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine of up to \$5,000 and/or 10 years imprisonment (RCW 46.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE: Owner Signature(s) & Title(s):			DATE OF SALE	PURCHASE PRICE
X Kenneth K. Marvin				\$
X Susan R. Marvin				
X				
MARCIA J. JENNINGS			DATE OF SALE	PURCHASE PRICE
MARCIA J. JENNINGS				
MARCIA J. JENNINGS			DATE OF SALE	PURCHASE PRICE
MARCIA J. JENNINGS				



NOTARY PUBLIC	SUBSCRIBED TO AND SWORN BEFORE ME THIS	Residing in (County)
MARCIA J. JENNINGS	5th DAY OF June 19 96	Skagit

<b>6 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents) My Commission Exp: 10/5/96</b>			
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	SIGNATURE	OFFICE/VFS OPERATOR NUMBER	DATE
DEPT. OF LICENSING	X [Signature]	9701-02	6-18-96

9606120075

BK1558PG0179



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 351117-0-004-0500

Legal Description:

LOT 1, OF SKAGIT COUNTY SHORT PLAT NO. 91-087 AS ASPPROVED FEBRUARY 28, 1992, AND RECORDED FEBRUARY 24, 1992, IN VOLUME 10 OF SHORT PLATS, PAGES 62 AND 63, UNDER AUDITOR'S FILE NO. 9202240043, RECORDS OF SKAGIT COUNTY, WASHINGTON; BEING A PORTION OF GOVERNMENT LOT 5, SECTION 17, TOWNSHIP 35 NORTH, RANGE 11 EAST OF THE WILLAMETTE MERIDIAN.

SITUATED IN SKAGIT COUNTY, WASHINGTON.