

**RETURN ADDRESS**

LAND TITLE COMPANY  
 2801 COMMERCIAL AVENUE, SUITE #2  
 ANACORTES, WA 98221  
 PA-89980-E



200001240123

Kathy Hill, Skagit County Auditor

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**STATE OF WASHINGTON**  
 Department of  
**Licensing**  
**MANUFACTURED HOME APPLICATION**

**PLEASE CHECK ONE**

TITLE ELIMINATION     TRANSFER IN LOCATION     REMOVAL FROM REAL PROPERTY

**1 MANUFACTURED HOME**

TPO / PLATE NUMBER: 1999    YEAR: 2000    MAKE: Silvercrest    LENGTH/WIDTH (FEET): 52X28    VEHICLE IDENTIFICATION NUMBER (VIN): MSO Serial No. 177-11439-AB

**2 LAND**    **ADDITIONAL LEGAL DESCRIPTION ON PAGE**    **TITLE FEES**

MANUFACTURED HOME WILL BE  AFFIXED     REMOVED    PROPERTY TAX PARCEL NUMBER: P65958 & P65959    FILING FEE

LOT: 15&16    BLOCK: 5    PLAT NAME: "HOLIDAY HIDEAWAY NO. 1"    SECTION/TOWNSHIP/RANGE:    APPLICATION FEE: 5.25

A legal description can be obtained from the local County Assessor's Office. If there is not enough room here, use the Application Attachment form, TD-420-732, available at your local County Auditor's Office.  
 Lots 15 and 16, Block 5, "HOLIDAY HIDEAWAY NO. 1", as per plat recorded in Volume 8 of Plats, pages 36 through 42, inclusive, records of Skagit County, Washington.  
 Situate in the County of Skagit, State of Washington.

MOBILE HOME FEE: 15.00  
 ELIMINATION FEE: 25.00  
 USE TAX:  
 SUB-AGENT FEES:  
 TOTAL FEES & TAX: 45.25

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)**    **ADDITIONAL NAMES ON PAGE**

COUNTY: Skagit    INCORPORATED:    UNINCORPORATED:     # REGISTERED OWNERS: 2    # LEGAL OWNERS: 1  
 NAME OF FIRST REGISTERED OWNER: NORMAN E. GOODE    DOL CUSTOMER ACCOUNT NUMBER: GOODENE57PG  
 ADDRESS OF FIRST REGISTERED OWNER: 7037 HOLIDAY HIDEAWAY    CITY: ANACORTES    STATE: WA    ZIP CODE: 98221  
 NAME OF FIRST LEGAL OWNER: WASHINGTON MUTUAL BANK    UBI: 601576388  
 ADDRESS OF FIRST LEGAL OWNER: 5201 Evergreen Way    CITY: Everett    STATE: WA    ZIP CODE: 98203

**GRANTEE(S)**    **ADDITIONAL NAMES ON PAGE**

NAME OF FIRST GRANTEE:    DOL CUSTOMER ACCOUNT NUMBER:

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, imprisonment, or both. (RCW 49.12.210)

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I / WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:  
 SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: [Signature]  
 SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE: [Signature]  
 SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE: [Signature]

**NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**  
 State of Washington    County of Skagit    Signed or attested before me on Sept. 1, 1999  
 by Norman E. Goode & Joanne B. Goode  
 Printed Name of Applicant  
 Title Lisa J. Richards    Dealer No. OR 7/9/2000  
 AND: County/Office No. OR    Notary Expiration Date

**DEALER'S REPORT OF SALE** I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

DEALER NAME: Midway    WA DEALER NUMBER:    DATE OF SALE: 1/24/00  
 PURCHASE PRICE: 30,000.00    TAX JURISDICTION/TAX RATE:    DEALER'S AUTHORIZED SIGNATURE: [Signature]

**4 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 (TYPED OR PRINTED): Teresa Medved    COUNTY OFFENSES OPERATOR NUMBER:  
 SIGNATURE: [Signature]    DATE: 1-24-00

<b>5 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 / POSITION	DATE
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.	
<b>6 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	
NAME	BLDG PERMIT OFFICE/PHONE #
TAWNEE BOSMAN	SKAGIT COUNTY PERMIT CENTER (360) 336-9410
SIGNATURE / POSITION	DATE
Tawnee Bosman	1 Support Services 01/07/00

### INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW, DEPENDING UPON THE TRANSACTION YOU WISH TO PROCESS.

- A. Manufactured Home Title Elimination Application** (complete boxes 1, 2, 3, 4 and 6). Use to eliminate a title for a manufactured home which is to become real property.
- B. Manufactured Home Transfer In Location Application** (complete all boxes). Use **only** when a manufactured home (whose title has been eliminated) is being moved to land with a different legal description **AND** will become part of the real property to which it will be moved and affixed. If the transfer in location is between two different counties, prepare this form in duplicate and have each recorded in its respective county.
- C. Manufactured Home Removal From Real Property Application** (complete boxes 1, 2, 3, 4 and 5). Use when titling a manufactured home whose title has been previously eliminated. Once properly completed and recorded, this application becomes a supporting document along with others required to apply for a Certificate of Title for the manufactured home.

**IMPORTANT: SIGNATURES OF THE OWNERS ON THE MANUFACTURED HOME APPLICATION 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 IT IS/WILL BE AFFIXED. IF THE MANUFACTURED HOME IS BEING REMOVED FROM REAL PROPERTY, SIGNATURES OF THE OWNERS PER THE REAL PROPERTY RECORDS INDICATE CONSENT TO THE REMOVAL. THE FORM MAY THEN BE USED FOR MAKING APPLICATION FOR TITLE WITH THE DEPARTMENT OF LICENSING AS PROVIDED BY CHAPTER 46.12 RCW.**

should be checked. The application must then be accompanied by two separate land descriptions.

- SECTION 3** This area must be signed by all registered owners of the manufactured home when processing a title elimination. **If the manufactured home has been sold and is being removed from the real property, the owners per the real property records must complete this portion to obtain a Certificate of Title.** Signatures of the owners must be notarized or certified by the selling dealer or a vehicle licensing agent. Fees will include a filing and application fee plus sales or use tax due. Additional fees may include: a title elimination fee and a Mobile Home Affairs Fee. Subagents will charge an additional service fee. (Fees are subject to change without notice.)
- SECTION 4** Take the properly completed Manufactured Home Application and all necessary supporting documents to the County Auditor/Licensing Agent Office for approval. Supporting documents may include but are not limited to: proof of ownership or a Manufacturer's Statement of Origin (MSO), proof of taxes paid, and applicable release(s) of interest. Subagents may **not** complete the approval portion of this form.
- SECTION 5** The "Title Company Certification" box must be completed when processing a "Transfer In Location" or a "Removal From Real Property" application. **Important:** The final recorded application form must be submitted to a vehicle licensing agent within 10 days of the title company's certification.
- SECTION 6** When processing an "Elimination" or "Transfer In Location" application, a city or county office (depending upon the location of the manufactured home) must certify that the home is affixed to the land; or, issue a building permit to affix the manufactured home to the land, inspecting the completed attachment. The issuing office must sign the application, adding the permit number if the inspection has not yet occurred.

**IMPORTANT:** Once the application has been approved by the County Auditor/Licensing Agent Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.

**APPLICANTS:** Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees.

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.



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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 P65958 & P65959

Legal Description:

Lots 15 and 16, Block 5, "HOLIDAY HIDEAWAY NO. 1", as per plat recorded in Volume 8 of Plats, pages 36 through 42, inclusive, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.



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Kathy Hill, Skagit County Auditor

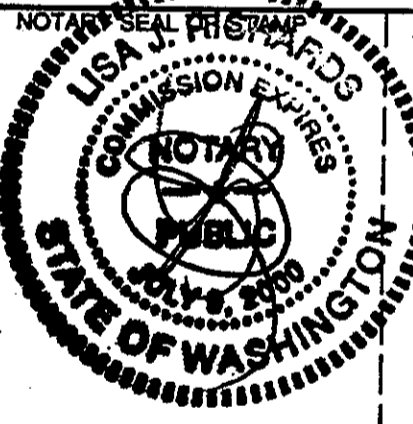
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## OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. 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

**PROPERTY TAX PARCEL NUMBER:** P65958 & P65959

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER <b>JOANNE B. GOODE</b>	DOL CUSTOMER ACCOUNT NUMBER <i>Goode JB 25 PG</i>
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
<b>SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:</b>	
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
<b>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, imprisonment, or both. (RCW 46.12.210)</b>	
<b>I DO SOLEMNLY ATTEST UNDER PENALTY OF PURJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:</b>	
SIGNATURE OF REGISTERED OWNER <i>Joanne B. Goode</i>	DATE <i>9-1-99</i>
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
<b>NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>	
	State of Washington County of <u>Skagit</u>  Signed or attested before me on <u>Sept 1, 1999</u>  Joanne B. Goode Printed Name of Applicant  Title <u>Lisa J. Richards</u> DEALERSHIP Position/Agent/NOTARY
	Dealer No. OR AND: County/Office No. OR <u>7/9/2000</u> Notary Expiration Date

*The Department of Licensing has a policy of providing equal access to its services. If you need special ac* 985.

