First American Title Copany	I TREATE HERE MANY MANY AND
160 Cascade Place, Suite 104	200001250017
Burlington, WA 98233	200001250017 Kathy Hill, Skagit County Auditor
Escrow No. B59272	1/25/2000 Page 1 of 4 9:45:12AN

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Entre of Washington Licensin	MANUFACT	URED HOM	I E FIRST AMERICA	N TITLE CO.
▼ TITLE ELIMINATION	PLEASE C	HECK ONE	のし MOVAL FROM REAL	
MANUFACTURED HOME				
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28073 1999 2 LAND	12 ² 2 1224	28 1-18		
	# # 37 4	GAL DESCRIPTION		TITLE FEES FILING FEE
MANUFACTURED HOME WIL	LBE DAFFIXED □ REMON	4169-001	× PARCEL NUMBER -016-0100	
2 Ptn 16 BLOCK 1	PLATNAME ROSEDALE GARDEN TRA			APPLICATION MOBILE HOME FEE
A legal description can be obtain use the Application Attachment	ned from the local County Assessor form, TD-420-732, available at you	r's Office. If there is r r local County Audito	ot enough room here, r's Office.	ELIMINATION FEE
,				USE TAX
See Schedul	e "A" attached			SUB-AGENT FEES
				TOTAL FEES & TAX
GRANTOR(S) REGISTERE COUNTY # INCORPORAT		DITIONAL NAMES C	·	
Skagit XX		GISTERED OWNERS 2	# LEGAL OWNERS	
NAME OF FIRST REGISTERED OWNER Danny L. Cabe			DOL CUSTOMER ACCABE*DL59	COUNT NUMBER
ADDRESS OF FIRST REGISTERED OW			STATE ZIF	CODE
124 North Reed Str	eet Se	drø Woolley		8284
U S Bank National	Association		DOL CUSTOMER AC	COUNT NUMBER
ADDRESS OF FIRST LEGAL OWNER	CITY	т 1		CODE
6000 Atrium Way GRANTEE(S)	Mt	. Laure1 DITIONAL NAMES O	70,000, 7000	8054
NAME OF FIRST GRANTEE	AUG	// NONAL NAMES &	DOL CUSTOMER AC	COUNT NUMBER
fact is guilty of a felony, punished by a fine, imprison SIGNATURE OF LEGAL OWN	es a false statement of a material and upon conviction may be ment, or both. (RCW 46.12.210) ER INDICATES CONSENT FOR OVAL EROM REAL PROPERTY:	LAW THAT I / WE THIS VEHICLE AN	ATTEST UNDER PENAL ARE THE REGISTERED ID THIS INFORMATION I	OWNERS OF S ACCURATE:
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SIN SSION ELIT	State of Washington County of Skagit		Signed or attested 9	8-99
MONAPHISEALIOR STAMP	by Kerry L. Ashe		Signature Kessus	Lashe
WBLIC SE	Printed Name of Appli	icant	Dealer No. OR	<i>A.</i>
1 1 0 1 26 03 W C 1111	Title <u>Escrow Assistan</u> DEALERSHIP Position/Age		_ AND: County/Office No. OR Notary Expiration Date	3/26/2003
ST PUBLIC STATES OF WASHINITHINITHINITHINITHINITHINITHINITHINI				
DEALER'S REPORT OF SALE	I certify that this information is c	orrect. The vehicle	s clear of encumbrances	except as shown.
PEALER NAME	1 17		ER NUMBER DATE O	
Prestige Manufactu		4539		5/99
\$50,420.00 7	·8%	dualle	VO 19	
	ale to a Certified Tribal member on			delivery).
	LICENSING OFFICE APPROVAL	•	<u> </u>	
certify that the above application of this	n appears to have been completed form.	уот еспу, япа те ар	plicant has sufficient docu	mentation to
IAME (TYPED OR PRINTED)	an Modilion		COUNTY OF REALE	S PERATOR NUMBER
IGNATURE I	THE IT SUITE	Y)	3701	<u></u>
IGIVA FURE	sel Thustues		DATE	15.00

TD-420-729 MANUF HOME APPL (R/12/96)OR Page 1 of 2

INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE SIDE

5 TITLE COMPANY CERTIFICATION	<u></u>			
I certify that the legal description of the land and ov	vnership is tru	e and correct pe	r the real property record	ds.
Kerry L. Ashe	First	American	NY/PHONE NUMBER Title Company	360-404-2000
SIGNATURE / POSITION COM Escr	ow Assis	tant		9/1795
Finalize (is application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.				
BUILDING PERMIT OFFICE CERTIFICATION	l			
certily that the manufactured home has been affix purpose and the attachment will be inspected upon	ed to the real completion	45007		
Ardell McCombs		BLDG PERMI	T OFFICE/PHONE # 360-855-	-0771
SIGNATURE / POSTION W. M. Con	= Buildi	ng Offici		9/10/29

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.

- Note: Owners of the manufactured home must own the land when the application is for a Manufactured Home Title Elimination or a Manufactured Home Transfer In Location, as provided by Chapter 65.20 RCW.
- SECTION 1 Enter the description of the manufactured home.
- SECTION 2 Place an "X" in the appropriate box and enter the property tax parcel number, lot, block, plat number and section/township/range, when applicable. Write a legal description in the space provided. If there is not enough room, use the Title Application Attachment (TD0420-732). When processing a "Transfer in Location Application," both boxes should be checked. The application must then be accompanied by two separate land descriptions.
- 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 Beal 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 typ	. TA	tle Elimination emoval From Real Property ansfer In Location	
_and:		Number <u>4169-001-016-0100</u> R11382	5
	Legal Description:		

Lot 2 of Sedro Woolley Short Plat No. 98-04, approved September 10, 1998, recorded October 16, 1998 in Volume 13 of Short Plats, page 173, under Auditor's File No. 9810160075, being a portion of Lot 16, Block 1, "ROSEDALE GARDEN TRACTS OF SEDRO WOOLLEY", as per plat recorded in Volume 3 of Plats, page 52, records of Skagit County, Washington.

TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over, under and through the North 10 feet of Lot 1, Short Plat No. SW-98-04, filed in Volume 13 of Short Plats, Pages 173 and 174, records of Skagit County, Washington.



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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.

Removal From Real Property
Transfer in Location

CHECKTYPE OF APPLICATION: Title Elimination

PROPERTY TAX PARCEL N	JMBER: 4169-001-016-0100 R113825	
ADDITIONAL GRANTOR(S)	REGISTERED/LEGAL OWNER(S)	
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
Joan E. Cabe		CABE*JE584Q2
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF LEGAL OWNER		
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MONTH SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR REGISTE	RED OWNER(S) SIGNATURE
HANNE OF REGISTERED OWNER WOMEN SEAL OR STAMP AS A SA	State of Washington Skagit Signa	od or attested 9-8-99
ANOTARY PE	A Marrier I Acha	1/ 2/00/2
PUBLIC DE	by Kerry L. Ashe Printed Name of Applicant Signs	ature Kerry Carre
1 3.26.03.11 CHILLIAN	Title Escrow Assistant AND: DEALERSHIP Position/Agent/NOTARY	Desier No. OR 3/26/2003
ASAR IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	First American Title Company	Notary Expiration Date

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If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.

TD-420-732 APP ATTACHMENT(R/12/96)OR Page 2 of 2



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