

RETURN ADDRESS



200007110023

Kathy Hill, Skagit County Auditor  
7/11/2000 Page 1 of 2 9:16:47AM

**STATE OF WASHINGTON**  
Department of  
**Licensing**

**MANUFACTURED HOME APPLICATION**

**PLEASE CHECK ONE**

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)

**1 MANUFACTURED HOME**

TPO PLATE NUMBER YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN)  
B 48029 88 SKagit oak 56 X 28 0691-0A71-XAB

**2 LAND** LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER P20452

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE  
A\* ptnC SKagit Co. Short Plat 15-84 17 34N 2E, W.M.

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

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS  
2 2

NAME OF REGISTERED OWNER Donald C. Tidrington

NAME OF ADDITIONAL REGISTERED OWNER Amie L. Tidrington

ADDRESS CITY STATE ZIP CODE  
7427 Sunnise Estates Ln Anacortes WA 98221

NAME OF LEGAL OWNER Donald C. Tidrington

NAME OF ADDITIONAL LEGAL OWNER Amie L. Tidrington

ADDRESS CITY STATE ZIP CODE  
7427 Sunnise Estates Ln. Anacortes, WA 98221

**GRANTEE**

NAME

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP: THERESA E. YOUNG, STATE OF WASHINGTON, NOTARY PUBLIC, MY COMMISSION EXPIRES 12-16-03

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skagit Signed or attested before me on 7-10-00

by DONALD CHARLES TIDRINGTON Signature Theresa E Young  
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by Amie L Tidrington Theresa E Young  
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title Lending officer AND: County/Office No. OR Dealer No. OR 12-16-03  
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date

**4 TITLE COMPANY CERTIFICATION**

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME (TYPED OR PRINTED) TITLE COMPANY / PHONE NUMBER  
DONALD G. PETERSON ISLAND TITLE CO. (360)293-4664

SIGNATURE / POSITION DATE  
[Signature] TITLE OFFICER - EXAMINER 7-7-2000

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

**5 BUILDING PERMIT OFFICE CERTIFICATION**

I certify that:  the manufactured home has been affixed to the real property as described.  
 a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED) BLDG PERMIT OFFICE/PHONE # BLDG PERMIT #

SIGNATURE / POSITION DATE

**6 SIGNATURE OF LEGAL OWNER**

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP  
  
THERESA E. YOUNG  
STATE OF WASHINGTON  
NOTARY ---- PUBLIC  
MY COMMISSION EXPIRES 12-16-03

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**

State of Washington  
County of Skagit  
Signed or attested before me on 7-10-00  
by DONALD CHARLES TIDDRINGTON Signature Theresa E Young  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT  
by Amie L Tidrrington Theresa E. Young  
PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY  
Title Lending Office AND: County/Office No. OR  
DEALERSHIP POSITION/AGENT/NOTARY Dealer No. OR 12-1603  
Notary Expiration Date

**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

**8 DEALER'S REPORT OF SALE**

I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

|                                |                           |                               |              |
|--------------------------------|---------------------------|-------------------------------|--------------|
| DEALER NAME (TYPED OR PRINTED) |                           | WA DEALER NUMBER              | DATE OF SALE |
| PURCHASE PRICE                 | TAX JURISDICTION/TAX RATE | DEALER'S AUTHORIZED SIGNATURE |              |

USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).

**9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)**

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)<br><u>Kirsty Lowery</u> | COUNTY OFFICE/VFS OPERATOR NUMBER<br><u>290108</u> |
| SIGNATURE<br><u>Kirsty Lowery</u>               | DATE<br><u>7/11/00</u>                             |

**10 TITLE FEES**

|            |             |                 |                 |         |                  |
|------------|-------------|-----------------|-----------------|---------|------------------|
| FILING FEE | APPLICATION | MOBILE HOME FEE | ELIMINATION FEE | USE TAX | SUBAGENT FEES    |
|            |             |                 |                 |         | TOTAL FEES & TAX |

**IMPORTANT:** Once the application has been approved by the County Auditor / Vehicle Licensing 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. Vehicle licensing subagents charge a service fee.

For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.

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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Kathy Hill, Skagit County Auditor