

RETURN ADDRESS



200008220129
Kathy Hill, Skagit County Auditor
8/22/2000 Page 1 of 2 3:51:44PM

ISLAND TITLE CO. B/6225 ✓

STATE OF WASHINGTON
Department of
Licensing

MANUFACTURED HOME APPLICATION

PLEASE CHECK ONE
 TITLE ELIMINATION
 TRANSFER IN LOCATION
 REMOVAL FROM REAL PROPERTY

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

TPG / PLATE NUMBER 837172	YEAR 1988	MAKE Skyline	LENGTH/WIDTH(FEET) 56 X 27	VEHICLE IDENTIFICATION NUMBER (VIN) 54910337XAB
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
350402-4-010-0300

LOT Tract 2	BLOCK	PLAT NAME Skagit Co Short Plat No. 96-0064	SECTION/TOWNSHIP/RANGE 2/35/4
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
Michael Blackwell

NAME OF ADDITIONAL REGISTERED OWNER
Sandra Blackwell

ADDRESS CITY STATE ZIP CODE
6967 Faye Place Sedro Woolley WA 98284

NAME OF LEGAL OWNER
Horizon Bank

NAME OF ADDITIONAL LEGAL OWNER

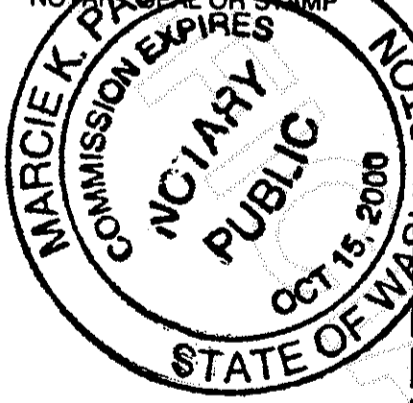
ADDRESS CITY STATE ZIP CODE
1500 Cornwall Bellingham WA 98225

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 *Mike Blackwell*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Sandra Blackwell*



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of SKAGIT Signed or attested before me on JUNE 22 2000

MIKE BLACKWELL Signature Marcie K Paleck
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by SAUNDRA BLACKWELL
PRINT NAME OF REGISTERED OWNER

Title NOTARY PRINTED NAME OF NOTARY

DEALERSHIP POSITION/AGENT/NOTARY AND: County/Office No. OR Dealer No. OR 10/15/00 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) MARCIE K. PALECK TITLE COMPANY / PHONE NUMBER ISLAND TITLE 757-1494

SIGNATURE / POSITION Marcie K Paleck DATE 8/8/00

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.

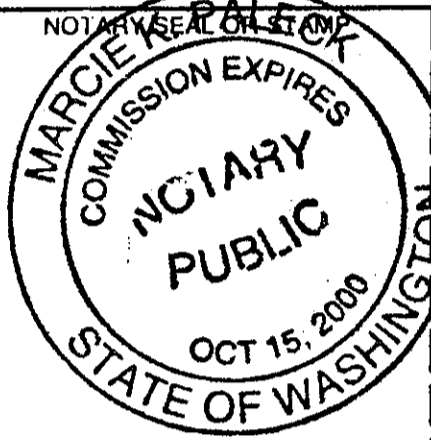
NAME (TYPED OR PRINTED) <u>TANNIEE BOSMAN</u>	BLDG PERMIT OFFICE/PHONE # <u>SKAGIT COUNTY PERMIT CENTER</u>	BLDG PERMIT # <u>BPOD-0564</u>
SIGNATURE / POSITION <u>Tannee Bosman</u>	<u>Support Services</u>	DATE <u>08/02/00</u>

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 Jenny Baultt A.V.P.

Signature of Additional Legal Owner and Title, IF APPLICABLE _____



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
County of SKAGIT

Signed or attested
before me on July 21 2000

HORIZON BANK
by TAMY BARNETT ASST. V.P.
PRINT NAME OF LEGAL OWNER

Signature Marcie K. Paleck
NOTARY OR AGENT

by _____
PRINT NAME OF LEGAL OWNER

MARCIE K. PALECK
PRINTED NAME OF NOTARY

Title NOTARY
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR
Dealer No. OR 10/15/00
Notary Expiration Date

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

Lot 2 of SKAGIT COUNTY SHORT PLAT NO. 96-0064, as approved May 18, 2000, and recorded May 19, 2000, under Auditor's File No. 200005190004, records of Skagit County, Washington; being a portion of the Southwest Quarter of the Southeast Quarter of Section 2, Township 35 North, Range 4 East of the Willamette Meridian.

Situated in Skagit County, Washington.

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) COACH CORRAL INC WA DEALER NUMBER 4278 DATE OF SALE 7-19-00

PURCHASE PRICE 32500 TAX JURISDICTION/TAX RATE 7.8 DEALER'S AUTHORIZED SIGNATURE Linda Milbourn

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) CRYSTAL R. BURRESS COUNTY OFFICE/VFS OPERATOR NUMBER 29-01-10

SIGNATURE Crystal R. Burress DATE _____

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
If you need special accommo



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Kathy Hill, Skagit County Auditor