



200102200097

Skagit County Auditor

2/20/2001 Page 1 of 2 12:07:16PM

RETURN ADDRESS

Island Title Company

P.O. Box 670

Burlington, WA 98233

ISLAND TITLE CO. B17227 ✓

**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**

TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	1976	Academy	60 X 24	05940131J

**2 LAND** LEGAL DESCRIPTION ON PAGE \_\_\_\_\_

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER: 3968-000-006-0008 P68083

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
G		PRESENTIN CREEK WILDERNESS	

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

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	1	1

NAME OF REGISTERED OWNER: RUBY B. WHITE

NAME OF ADDITIONAL REGISTERED OWNER:

ADDRESS: P.O. Box 134 Sumas WA 98295

CITY: STATE: ZIP CODE:

NAME OF LEGAL OWNER: U S BANK

NAME OF ADDITIONAL LEGAL OWNER:

ADDRESS: 3000 Leadenhall Road

CITY: Mt. Laurel, NJ STATE: ZIP CODE: 08054

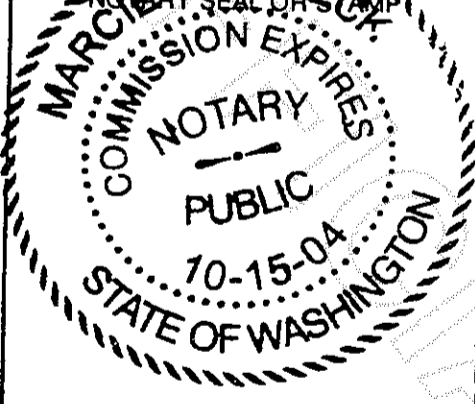
**GRANTEE**

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: *Ruby B. White*

Signature of Additional Registered Owner and Title, IF APPLICABLE:



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

State of Washington County of Skagit Signed or attested before me on 1/17/01

by Ruby B. White PRINT NAME OF REGISTERED OWNER Signature: *Marcie K. Paleck* NOTARY OR AGENT

by Marcie K. Paleck PRINT NAME OF REGISTERED OWNER

Title Notary DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR 10/15/04 Dealer No. OR 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:

SIGNATURE / POSITION: DATE:

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): Robin Tempest

BLDG PERMIT OFFICE/PHONE #: SKAGIT COUNTY PERMIT CENTER 336-9410

BLDG PERMIT #: 96-0483

SIGNATURE / POSITION: *Robin Tempest* Support Services Technician


DATE: 2-16-01

**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 Melissa Siegel  
Melissa Siegel

Signature of Additional Legal Owner and Title, IF APPLICABLE \_\_\_\_\_

	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>	
	State of <del>Washington</del> <sup>New Jersey</sup> County of <u>Burlington</u>	Signed or attested before me on <u>1-30-01</u>
	by <u>Melissa Siegel</u> PRINT NAME OF LEGAL OWNER	Signature <u>Rosalia Rivera</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>Rosalia Rivera</u> AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>4-13-05</u>

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

LOT 6, PRESENTIN CREEK WILDERNESS, SUBDIVISION NO. 1, according to the plat thereof recorded in Volume 8 of Plats, page 47 records of Skagit County, Washington.

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)		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) <u>CRYSTAL R. BURRESS</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-10</u>
SIGNATURE <u>Crystal R. Burress</u>	DATE <u>2-20-01</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  
If you need special accommodation,



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