



200204020075

Skagit County Auditor

4/2/2002 Page 1 of 2 11:58AM

RETURN ADDRESS

		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE <input type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input checked="" type="checkbox"/> 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)	
+ 67790	86	Fleetwood	48 X 28	RFLBS2AG034805708	
2 LAND					
MANUFACTURED HOME WILL BE <input type="checkbox"/> AFFIXED <input checked="" type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER 3989-001-005-1000		
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
37					
NAME OF REGISTERED OWNER					
MERIDIAN HOME CENTER, INC					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
110 W. Axton Rd		Bellingham	WA	98226	
NAME OF LEGAL OWNER					
MERIDIAN HOME CENTER, INC.					
NAME OF ADDITIONAL LEGAL OWNER					
Same					
ADDRESS		CITY	STATE	ZIP CODE	
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 <i>Michael D. Furness</i> General MGR					
Signature of Additional Registered Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <i>Skagit</i>		Signed or attested before me on <i>4/2/02</i>	
		by <i>Michael D. Furness</i> PRINT NAME OF REGISTERED OWNER		Signature <i>[Signature]</i> NOTARY OR AGENT	
		by _____ PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY County/Office No. OR <i>39018</i> Dealer No. OR _____ AND: Notary Expiration Date	
		Title _____ DEALERSHIP POSITION/AGENT/NOTARY			
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		
<i>JAMES H. FAGAN</i>			<i>LAND TITLE Co. 707-2158</i>		
SIGNATURE / POSITION			DATE		
<i>[Signature]</i> TITLE OFFICER			<i>4-2-02</i>		
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:					
<input type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> 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	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of _____	Signed or attested before me on _____
	by _____ PRINT NAME OF LEGAL OWNER	Signature _____ NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY _____
Title _____ DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR Notary Expiration Date	

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

TRACT "B" of Skagit County Short PLAT NO. 39-76 Approved 8/9/76 recorded in Block 1 of Short Plats, pg 158, under AF# 840641; being a ptr. of tract 5 of "L.W.L." CO's Samish River Acreage Plat No. 1 Skagit County, Washington, a per plat recorded in volume 3 of Plats, page 69, records of 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
<input type="checkbox"/> 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) Kirsty Lowrey	COUNTY OFFICE/VES OPERATOR NUMBER 090108
SIGNATURE Kirsty Lowrey	DATE 4/2/02

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) 890-8888.



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