

RETURN ADDRESS

MR & MRS GULLEY
P.O. BOX 177
CONCRETE, WA 98237



200304090260
Skagit County Auditor

4/9/2003 Page 1 of 2 3:35PM

LAND TITLE COMPANY OF SKAGIT COUNTY
5-104038

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: 8055862
YEAR: 1994
MAKE: GLDNW
LENGTH/WIDTH(FEET): 27 X 40
VEHICLE IDENTIFICATION NUMBER (VIN): NH 13081

2 LAND
LEGAL DESCRIPTION ON PAGE: Capehorn on the Skagit
MANUFACTURED HOME WILL BE: AFFIXED REMOVED
REAL PROPERTY TAX PARCEL NUMBER: 3869-010-007-0006

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)
ADDITIONAL NAMES ON PAGE
COUNTY NUMBER: _____ NUMBER OF REGISTERED OWNERS: _____ NUMBER OF LEGAL OWNERS: _____

NAME OF REGISTERED OWNER: WILSON GULLEY
NAME OF ADDITIONAL REGISTERED OWNER: KATHERINE GULLEY
ADDRESS: 3986 South Shore Sedro Woolley WA 98284
NAME OF LEGAL OWNER: TRANSPORTATION NW CREDIT UNION
NAME OF ADDITIONAL LEGAL OWNER: _____

ADDRESS: P.O. BOX 80847
CITY: SEATTLE
STATE: WA
ZIP CODE: 98108
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]*
Signature of Additional Registered Owner and Title, IF APPLICABLE: *[Signature]*



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE
State of Washington
County of: Skagit
Signed or attested before me on: 4-10-2003
PRINT NAME OF REGISTERED OWNER: WILSON GULLEY
Signature: *[Signature]*
PRINT NAME OF REGISTERED OWNER: KATHERINE GULLEY
Signature: *[Signature]*
PRINTED NAME OF NOTARY: MARY ANN K. LAGROSSA
County/Office No. OR Dealer No. OR Notary Expiration Date: 3-27-2006

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.

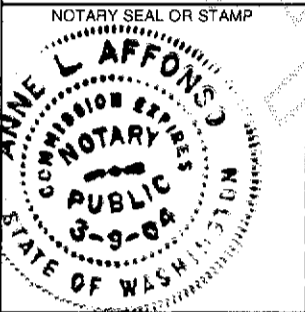
5 BUILDING PERMIT OFFICE CERTIFICATION
I certify that: the manufactured home has been affixed to the real property as described.
 a building permit has been issued for this purpose and the attachment will be inspected upon completion.
NAME (TYPED OR PRINTED): TISH CAMPBELL
BLOG PERMIT OFFICE/PHONE #: SKAGIT COUNTY PERMIT CENTER 540/336-9410
BLDG PERMIT #: 941913
SIGNATURE / POSITION: *[Signature]* DATE: 04/05/03

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 TRANSPORTATION NORTHWEST CREDIT UNION *Kathy Lutz* Loan Officer

Signature of Additional Legal Owner and Title, IF APPLICABLE _____



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington _____ Signed or attested before me on 3-6-03
 County of KING

by TRANSPORTATION NORTHWEST CREDIT UNION Signature *Anne L. Affonso*
 PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

by _____ PRINTED NAME OF LEGAL OWNER ANNE L. AFFONSO
 PRINTED NAME OF NOTARY

Title Loan Officer County/Office No. OR
 DEALERSHIP POSITION/AGENT/NOTARY AND: Dealer No. OR
 Notary Expiration Date 3/9/04

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

LOT 7, BLOCK "J" "CAPE HORN ON THE SKAGIT DIVISION NO. 2", AS PER PLAT RECORDED IN VOLUME 9 OF PLATS, PAGES 14 THROUGH 19, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON, SITUATE IN THE COUNTY OF SKAGIT, STATE OF 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) <i>Hirsty Lowery</i>	COUNTY OFFICE/VFS OPERATOR NUMBER <i>290108</i>
SIGNATURE <i>Hirsty Lowery</i>	DATE <i>4/9/03</i>

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 provided this form for your use. If you need special accommodations, please contact us.



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