

RETURN ADDRESS



200308280203
Skagit County Auditor

8/28/2003 Page 1 of 2 2:20PM

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 E1931079	YEAR 2001	MAKE CORLEEN WEST	LENGTH/WIDTH (FEET) 56 X 27	VEHICLE IDENTIFICATION NUMBER (VIN) 5N GWOR23N 25151AB
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2 LAND LEGAL DESCRIPTION OF PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
P 64136

LOT 74	BLOCK	PLAT NAME CEDAR ON THE SKAGIT	SECTION/TOWNSHIP/RANGE CONCRETE WA
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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
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NAME OF REGISTERED OWNER
RONALD M HOWELL

NAME OF ADDITIONAL REGISTERED OWNER
V. JEANNA HOWELL

ADDRESS P.O. Box 625	CITY CONCRETE	STATE WA	ZIP CODE 98237
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NAME OF LEGAL OWNER
WASHINGTON MUTUAL BANK

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS P.O. Box 91006	CITY SEATTLE	STATE WA	ZIP CODE 98111
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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 *Ronald M Howell*

Signature of Additional Registered Owner and Title, IF APPLICABLE *V. Jeanna Howell*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of **Skagit**

Signed or attested before me on **8/28/03**

by **RONALD M. HOWELL**
PRINT NAME OF REGISTERED OWNER

Signature *V. Jeanna Howell*
NOTARY OR AGENT

by _____
PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY _____

Title _____ AND: _____
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date **5/21/04**

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. **HAS BEEN**
 a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED) TISH CAMPBELL	BLDG PERMIT OFFICE/PHONE # 360 526-9410	BLDG PERMIT # 1300-1752
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SIGNATURE / POSITION
Tish Campbell, Permit Technician **08/28/03**

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 David R. Heinz
Washington Mutual Bank Corporate Officer

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

Notary Public
State of Washington
JASON A. KOSCHUTA
My Appointment Expires May 15, 2007

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
 County of KING

Signed or attested before me on 08/28/03

by DAVID R. HEINZ Signature Jason A. Koschuta
 PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

by WASHINGTON MUTUAL BANK JASON A. KOSCHUTA
 PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY

Title NOTARY PUBLIC AND: County/Office No. OR Dealer No. OR Notary Expiration Date 05/15/07

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

LOT 74 "CEDARGROVE ON THE SKAGIT," AS PER PHAT RECORDED IN VOLUME 9 OF PHATS, PAGES 48 THROUGH 51 INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON SITUATE IN THE COUNTY OF SKAGIT STATE OF WASH

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)	COUNTY OFFICE/VES OPERATOR NUMBER
<u>PEGGUA RIEDELL BRAHAM</u>	<u>29-01-84</u>
SIGNATURE	DATE
<u>Peggy Riedell Braham</u>	<u>8/8/03</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.



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