

RETURN ADDRESS



200310020262  
Skagit County Auditor

10/2/2003 Page 1 of 2 3:58PM

CHICAGO TITLE CO. *C26639 ✓*

**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)
	2003	Silvercrest	X	HWC331497-6-8-9-17309706A/B/C

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

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
4777-000-007-0000/P118032

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
7		River Valley View Estates	

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

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	2	1

NAME OF REGISTERED OWNER  
TIMOTHY E. SHELDON

NAME OF ADDITIONAL REGISTERED OWNER  
DEBRA A. SHELDON

ADDRESS CITY STATE ZIP CODE  
5798 Jennifer Lane Bellingham WA 98225

NAME OF LEGAL OWNER  
Whidbey Island Bank

NAME OF ADDITIONAL LEGAL OWNER

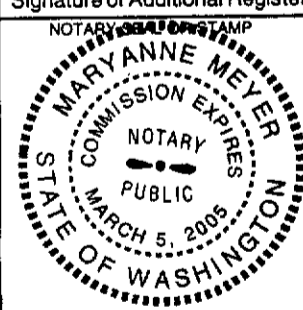
ADDRESS CITY STATE ZIP CODE  
265 York Street Bellingham WA 98225

**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 *Timothy E. Sheldon*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Debra A. Sheldon*



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

State of Washington County of Skagit Signed or attested before me on May 7, 2003

by Timothy E. Sheldon Signature *Mary Anne Meyer*  
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by Debra A. Sheldon Mary Anne Meyer  
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title Notary AND: County/Office No. OR Dealer No. OR 3-5-05  
DEALERSHIP POSITION/AGENT/NOTARY 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)	BLDG PERMIT OFFICE/PHONE #	BLDG PERMIT #
TRANCEE BOSMAN SKAGIT COUNTY PERMIT CENTRAL		0902-1519
SIGNATURE / POSITION		DATE
<i>Trancee Bosman</i> Support Services		09/30/03

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 Karen Keene

Signature of Additional Legal Owner and Title, IF APPLICABLE Karen Keene Simmons, Asst. Vice Pres. Whidbey Island Bank

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington  
County of Whatcom Signed or attested before me on 5/19/03

Whidbey Island Bank Signature Linda L. Simpson  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

Linda L. Simpson  
PRINTED NAME OF NOTARY

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

DEALERSHIP POSITION/AGENT/NOTARY



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

Lot 7, RIVER VALLEY VIEW ESTATES, according to the plat hereof, recorded on May, 7, 2001, under Auditor's File No. 200105070102, 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) <u>Midway Homes</u>	WA DEALER NUMBER <u>4161</u>	DATE OF SALE <u>7-03</u>
PURCHASE PRICE <u>119,591.00</u>	TAX JURISDICTION/TAX RATE <u>7.8</u>	DEALER'S AUTHORIZED SIGNATURE <u>Wayne Verbeke</u>

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>PEGGY A. BIEDELS-GRAHAM</u>	COUNTY OFFICE/MS OPERATOR NUMBER <u>29-01-01</u>
SIGNATURE <u>Peggy A. Biedels-Graham</u>	DATE <u>10/2/03</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 accommodations, please call (206) 462-3800 or TDD (206) 664-9900.

