

RETURN ADDRESS

Brandon K. Lewis
 2905 Timothy Pl
 MtVernon WA 98273



200409020037
 Skagit County Auditor

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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)
	2004	Fleetwood	60 X 56	ORFL448A29917 B913 /ORSL448B29917-B913

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER: 4719-000-030-000 P113644

LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
30		Bakerview West	

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	DOL CUSTOMER ACCOUNT NUMBER		
Brandon K. Lewis			
NAME OF ADDITIONAL REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER		
Tiffany M. Lewis			
ADDRESS	CITY	STATE	ZIP CODE
2905 Timothy Pl	MtVernon	WA	98273
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER		
Same As Grantee			
NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER		
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: Brandon K. Lewis by Katie E. Hickett for First American Title as Power of Attorney.

Signature of Additional Registered Owner and Title, IF APPLICABLE: Tiffany M. Lewis by Katie E. Hickett for First American Title as Power of Attorney.

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skagit Signed or attested before me on 8/5/04

NOTARY PUBLIC Brandon K. Lewis by Katie E. Hickett

STATE OF WASHINGTON First American Title Signature of Attorney

B. ELIZABETH THOMPSON My Appointment Expires JUNE 15, 2007

NAME OF REGISTERED OWNER: Tiffany M. Lewis by Katie E. Hickett for First American Title as Power of Attorney

PRINTED NAME OF NOTARY: B. Elizabeth Thompson

County/Office No. OR Dealer No. OR 06-19-07

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 #

Barrie Kenning 360-336-6214

SIGNATURE / POSITION DATE

Barrie Kenning Building Inspector 8-30-04

Skagit County Auditor
200409020037



The Department of Licensing has a policy of providing equal access to its services
If you need special accommodation, pl

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

7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's records of Skagit County, Washington)
Lot 30, "PLAT OF BARRIERS", as per plat recorded in Volume 17 of Plats, pages 13 through 16, inclusive.

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) Coach Corral	WA DEALER NUMBER 4278	DATE OF SALE 07/28/04
PURCHASE PRICE 87436	TAX JURISDICTION/TAX RATE 7.7	DEALER'S AUTHORIZED SIGNATURE <i>[Signature]</i>

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) Karinie Macrea	COUNTY OFFICE/OPERATOR NUMBER 2901-21
SIGNATURE <i>[Signature]</i>	DATE 9/2/04

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.