

RETURN ADDRESS



200412020144
Skagit County Auditor

12/2/2004 Page 1 of 2 3:32PM

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

PRO / PLATE NUMBER 1025936	YEAR 1981	MAKE Liberty	LENGTH/WIDTH(FEET) 50 X 24	VEHICLE IDENTIFICATION NUMBER (VIN) 14L11182XU
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
P60845

LOT 1-16	BLOCK 28	PLAT NAME Railroad to Amcortes	SECTION/TOWNSHIP/RANGE 04-34-02
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER Skagit	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER
Darrell W. Palmer

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS
12915 Satterlee Rd, Amcortes, WA 98221

CITY STATE ZIP CODE

NAME OF LEGAL OWNER

NAME OF ADDITIONAL LEGAL OWNER

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 *[Signature]*

Signature of Additional Registered Owner and Title, IF APPLICABLE

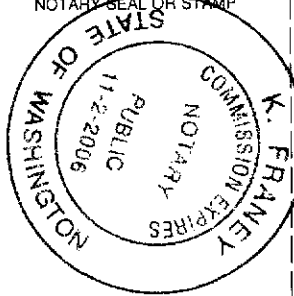
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of **Skagit** Signed or attested before me on **12/02/04**

by **Darrell W. Palmer** Signature *[Signature]*
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by _____
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title **Notary** AND: County/Office No. **OR** Dealer No. **OR 11-02-06**
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) KAYDEEN FRANEX	TITLE COMPANY / PHONE NUMBER LAND TITLE CO - 360-707-2310
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SIGNATURE / POSITION <i>[Signature]</i>	DATE 12/02/04
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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 #
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SIGNATURE / POSITION	DATE
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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 X

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)

(Title elimination) including manufactured home
1981 Liberty 50X24 serial number 14L11182XU
TPO # % 25936 Railroad to Anacortes Lots 1 to 16
Block 28.

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) <u>Rodriguez Angulo</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>290702</u>
SIGNATURE <u>[Signature]</u>	DATE <u>12/20/04</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, plea

