

RETURN ADDRESS



200412070096
Skagit County Auditor

12/7/2004 Page 1 of 2 1:34PM

Lynnwood Escrow Corp.
P.O. Box 5837
Lynnwood, WA 98046
Esc # 20033734

FIRST AMERICAN TITLE CO.
76797

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 NEW	YEAR 04	MAKE FLTWD	LENGTH/WIDTH(FEET) 56 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) ORFL44829961BS13
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
300301-4-009-0007 (P47566)

LOT	BLOCK	PLAT NAME Plat SW-SE	SECTION/TOWNSHIP/RANGE 1/36/3
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
Wanda L Twining

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS: 846 Lake Samish Rd, Bellingham, WA 98229

NAME OF LEGAL OWNER: GDF Savings Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS: P.O. Box 5010, Lynnwood, WA 98046

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: *Wanda L Twining*

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of *Snohomish* Signed or attested before me on *6/15/04*

by *Wanda L Twining* Signature *Michelle Everett*
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by *Michelle Everett*
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title _____ AND: County/Office No. OR *2-19-08*
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) *Elaine Pitman* BLDG PERMIT OFFICE/PHONE # *336-9410* BLDG PERMIT # *BP03-1526*
SKAGIT COUNTY PERMIT CENTER

SIGNATURE / POSITION *Elaine Pitman, Permit Technician* DATE *9-14-04*

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], ERP

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

PAMELA J. GRUBB
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
MARCH 6, 2005

Washington County of Snohomish

Signed or attested before me on 7-20-04

Swings Bank

Signature [Signature]
NOTARY OR AGENT

PRINT NAME OF LEGAL OWNER
Donn Costa, ERP

PRINTED NAME OF NOTARY
Pamela J. Grubb

Title Notary
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR 3606
Dealer No. OR 3606
Notary Expiration Date

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

That portion of the Southwest 1/4 of the Southeast 1/4 of Section 1, Township 36 North, Range 3 East, W.M., described as follows: Beginning at the intersection of the North line of said subdivision with the Westerly line of the County Road as said road existed on November 5, 1953; thence South along the West line of said road a distance of 450 feet; thence Westerly parallel with said North line a distance of 181.5 feet; thence Northerly to a point on said North line lying 181.5 feet Westerly of the point of beginning; thence Easterly along said North line to the point of beginning.

8 DEALER'S REPORT OF SALE Situate in the County of Skagit, state of Washington.

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>COACH CORRAL INC</u>	WA DEALER NUMBER <u>4278</u>	DATE OF SALE <u>6-22-04</u>
PURCHASE PRICE <u>67500-</u>	TAX JURISDICTION/TAX RATE <u>7.7</u>	DEALER'S AUTHORIZED SIGNATURE <u>Linda Milbourn</u>
<input type="checkbox"/> 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>Rodrigo Angulo</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>2901-02</u>
SIGNATURE <u>[Signature]</u>	DATE <u>12/07/04</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 h.
If you need special accommodat

