

RETURN ADDRESS

First American Title Company
 3202 Commercial Avenue
 Anacortes, WA 98221



200505230131
 Skagit County Auditor

5/23/2005 Page 1 of 2 11:32AM

A84371 *First American*

	MANUFACTURED HOME APPLICATION	PLEASE CHECK ONE <input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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 Z23065	YEAR 1981	MAKE Sequa	LENGTH/WIDTH(FEET) 60X 24	VEHICLE IDENTIFICATION NUMBER (VIN) 241181S5093

2 LAND		LEGAL DESCRIPTION ON PAGE	
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 3926-003-039-0004/P65874	
LOT 39	BLOCK 3	PLAT NAME Holiday Hideaway #1	SECTION/TOWNSHIP/RANGE

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)		ADDITIONAL NAMES ON PAGE	
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS 2	
NAME OF REGISTERED OWNER Charles D. Schuck			
NAME OF ADDITIONAL REGISTERED OWNER Gayla R. Schuck			
ADDRESS 23526 57th Ave. SE	CITY Woodinville	STATE WA	ZIP CODE 98072
NAME OF LEGAL OWNER Charles D. Schuck			
NAME OF ADDITIONAL LEGAL OWNER Gayla R. Schuck			
ADDRESS 23526 57th Ave. SE	CITY Woodinville	STATE WA	ZIP CODE 98072

GRANTEE
NAME Erick William Gilbertson
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 <i>Charles D. Schuck</i>
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Gayla R. Schuck</i>

	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>MAY 20, 2005</u>
	by <u>Charles D. Schuck</u> PRINT NAME OF REGISTERED OWNER	Signature <i>Tamara A. Satko</i> NOTARY OR AGENT
	by <u>Gayla R. Schuck</u> PRINT NAME OF REGISTERED OWNER	<u>TAMARA A. SATKO</u> PRINTED NAME OF NOTARY
Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>11/7/07</u>	

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) Vicki Hoffman	TITLE COMPANY / PHONE NUMBER First American Title Company 360-293-5423
SIGNATURE / POSITION <i>Vicki Hoffman</i>	DATE 5/20/05
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: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion	
NAME (TYPED OR PRINTED) TISH CAMPBELL, SKAGIT COUNTY PLANNING	BLDG PERMIT OFFICE/PHONE # 360/536-9410
SIGNATURE / POSITION <i>Tish Campbell Permit Technician</i>	BLDG PERMIT # #13279
	DATE 05/23/05

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 Charles D. Schuck
 Charles D. Schuck

Signature of Additional Legal Owner and Title, IF APPLICABLE Gayla R. Schuck
 Gayla R. Schuck



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
 County of Skagit
 Signed or attested before me on MAY 20, 2005

Charles D. Schuck
 PRINT NAME OF LEGAL OWNER
 Signature Tamara A. Satko
 NOTARY OR AGENT

Gayla R. Schuck
 PRINT NAME OF LEGAL OWNER
 PRINTED NAME OF NOTARY TAMARA A. SATKO

Title Notary
 DEALERSHIP POSITION/AGENT/NOTARY
 AND: County/Office No. OR
 Dealer No. OR 11/7/07
 Notary Expiration Date

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

Lot 39, Block 3, "HOLIDAY HIDEAWAY NO. 1", as per plat recorded in Volume 8 of Plats, pages 36 through 42, records of 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)		WA DEALER NUMBER	DATE OF SALE
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
<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/VES OPERATOR NUMBER <u>2901-02</u>
SIGNATURE <u>[Signature]</u>	DATE <u>May 23, 2005</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
 If you need special accommodation, pl



200505230131
 Skagit County Auditor