

RETURN ADDRESS



200508180075
Skagit County Auditor

8/18/2005 Page 1 of 4 11:37AM

CHICAGO TITLE IC34821 ✓

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 +095669	YEAR 1996	MAKE SKYLN	LENGTH/WIDTH(FEET) 48 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 2T910795I
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2 LAND LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
4660-000-011-0000 P10841

LOT 11	BLOCK	PLAT NAME PLAT OF EAGLE HILL	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
RONNIE R. CORNE

NAME OF ADDITIONAL REGISTERED OWNER
STACEY L. CORNE

ADDRESS 7823 WILDERNESS DRIVE	CITY CONCRETE	STATE WA	ZIP CODE 98237
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NAME OF LEGAL OWNER
PEOPLES BANK

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS 1801 RIVERSIDE DRIVE	CITY MOUNT VERNON	STATE WA	ZIP CODE 98273
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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 *Ronnie R. Corne*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Stacey L. Corne*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of SKAGIT

Signed or attested before me on 6-13-05

by RONNIE R. CORNE
PRINT NAME OF REGISTERED OWNER

Signature *Mary Anne Meyer*
NOTARY OR AGENT

by STACEY L. CORNE
PRINT NAME OF REGISTERED OWNER

MARY ANNE MEYER
PRINTED NAME OF NOTARY

Title NOTARY
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR Dealer No. OR 3-5-09
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
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SIGNATURE / POSITION	DATE
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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.

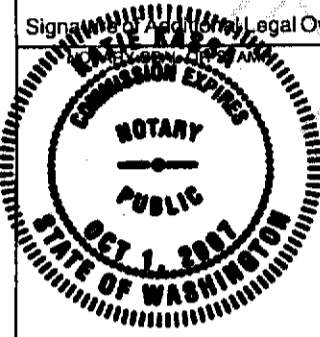
NAME (TYPED OR PRINTED) TISH CAMPBELL - SKAGIT COUNTY PLANNING	BLOG PERMIT OFFICE/PHONE # 360/356-9410	BLDG PERMIT # 95-1750
SIGNATURE / POSITION <i>Tish Campbell</i>	Permit Technician	DATE 8/18/05

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 *Dennis Boe, Vice President*

Signature of Additional Legal Owner and Title, IF APPLICABLE _____



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
County of SKAGIT

Signed or attested
before me on June 15, 2005

by Peoples Bank
PRINT NAME OF LEGAL OWNER

Signature *Katie Kassa*
NOTARY OR AGENT

by Dennis Boe, Vice President
PRINT NAME OF LEGAL OWNER

Katie Kassa
PRINTED NAME OF NOTARY

Title Notary Public
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR
Dealer No. OR
Notary Expiration Date 10-01-2007

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

The legal description is set forth in the Additional Attachment-
Legal Description of Land, attached hereto.

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>Rodrigo Angulo</u>	COUNTY OFFICE/VEH OPERATOR NUMBER <u>2901-07</u>
SIGNATURE <u><i>Rodrigo Angulo</i></u>	DATE <u>08/18/05</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
If you need special accommoda.





MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT
LEGAL DESCRIPTION OF LAND

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check type of application: Title Elimination
 Removal From Real Property
 Transfer In Location

Land: Property Tax Parcel Number 4660-000-011-0000 P108411

Legal Description:

Lot 11, PLAT OF EAGLE HILL, according to the plat thereof, recorded in Volume 16 of Plats, pages 67 and 68, records of Skagit County, Washington;

EXCEPT that portion described as follows:

Beginning at the Northwest corner of said Lot 11;
Thence South 00°01'20" West along the West line of Lot 11, a distance of 241.31 feet;
Thence South 15°19'08" East, a distance of 113.40 feet;
Thence North 79°39'35" East, a distance of 343.59 feet to a point on the East line of said Lot 11 which is 274.85 feet from the Northeast corner thereof;
Thence North 01°48'05" East along said East line, a distance of 274.85 feet to the Northeast corner of said Lot 11;
Thence North 87°49'32" West along the North line of said Lot 11, a distance of 376.78 feet to the Northwest corner of said Lot 11 and the point of beginning of this description.

Situated in Skagit County, Washington.



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OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK TYPE OF APPLICATION: Title Elimination
 Removal From Real Property
 Transfer In Location

PROPERTY TAX PARCEL NUMBER:

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:	
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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<p>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)</p> <p>I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:</p>	
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARY SEAL OR STAMP	<p style="text-align: center;">NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</p> State of Washington County of _____ Signed or attested before me on _____ by _____ <small>Printed Name of Applicant</small> Signature _____ Title _____ <small>DEALERSHIP Position/Agent/NOTARY</small> Dealer No. OR AND: County/Office No. OR Notary Expiration Date _____

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.



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