



200509070088
Skagit County Auditor

9/7/2005 Page 1 of 2 10:46AM

RETURN ADDRESS

VIRGINIA L. EMERSON
2706 DUNDEE PLACE
ANACORTES, WA 98221

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)
Q 95570 1977 PARMT 48 X 24 M8047TAB

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
3822-000 047-0003

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE
TRACT 49 SKYLINE 6

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS
2106 1

NAME OF REGISTERED OWNER
VIRGINIA L. EMERSON

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS CITY STATE ZIP CODE
2706 DUNDEE PL ANACORTES WA 98221

NAME OF LEGAL OWNER
VIRGINIA L. EMERSON

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE
SAME AS ABOVE

GRANTEE

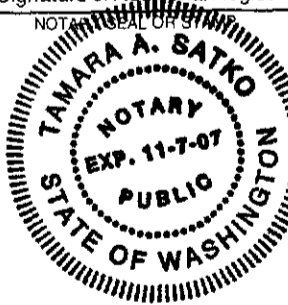
NAME

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 *Virginia Emerson*

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 9/2/05
by VIRGINIA L. EMERSON Signature Tamara A. Satko
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT
by TAMARA A. SATKO
PRINT NAME OF REGISTERED OWNER
Title NOTARY AND: County/Office No. OR Dealer No. OR 11/7/07
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.

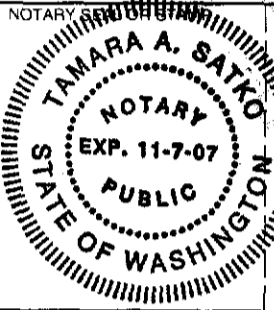
NAME (TYPED OR PRINTED) BLDG PERMIT OFFICE/PHONE # BLDG PERMIT #
EDWIN FRANK 360-293-5534 3067 Nov 1976
SIGNATURE/POSITION DATE
Edwin Frank 7 Sept 05

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 Virginia L Emerson

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 9/2/05
 PRINT NAME OF LEGAL OWNER: VIRGINIA L EMERSON Signature: Tamara A Satko
 PRINT NAME OF LEGAL OWNER: _____ NOTARY OR AGENT
 PRINTED NAME OF NOTARY: TAMARA A SATKO
 Title: NOTARY AND: County/Office No. OR Dealer No. OR Notary Expiration Date 11/7/07

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

TRACT 49, SKYLINE NO. 6, ACCORDING TO THE PLAT THEREFORE RECORDED IN VOLUME 9 OF PLATS, PAGES 64 THROUGH 67A, RECORDS OF SKAGIT COUNTY, WASHINGTON; SITUATED IN 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 | |

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>901-87</u> |
| SIGNATURE <u>[Signature]</u> | DATE <u>9/10/05</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 a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-2600 or TDD (360) 902-2600.



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