

RETURN ADDRESS

Brian R. Farcy
 18808 Fisherman's Loop
 Burlington, WA 98233



200607240179
 Skagit County Auditor

7/24/2006 Page 1 of 2 3:39PM

CHICAGO TITLE CO.

IC 37270

		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
*TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY					
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>[Signature]</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE: <i>[Signature]</i>					
NOTARY SEAL OR STAMP 		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of <u>Skagit</u> Signed or attested before me on <u>12-28-05</u> by <u>Brian R. Farcy</u> Signature <u>Cass M Mitchell</u> <small>PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT</small> by <u>Jennifer J. Farcy</u> <u>Cassandra M. Mitchell</u> <small>PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY</small> Title <u>Notary</u> AND: County/Office No. OR Dealer No. OR <u>3-10-09</u> <small>DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date</small>			
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) <u>Cass Mitchell</u>		TITLE COMPANY / PHONE NUMBER <u>Chicago Title 360-424-1700</u>			
SIGNATURE / POSITION <i>[Signature]</i>		DATE <u>7-21-06</u>			
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) <u>Elaine Pitman</u>		BLDG PERMIT OFFICE/PHONE # <u>336-9410</u>		BLDG PERMIT # <u>BP05-1128</u>	
SIGNATURE / POSITION <i>[Signature]</i>		DATE <u>7-24-06</u>		Permit Technician	

MANUFACTURED HOME - FROM SECTION 1				
TPQ/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	2006	Oakwood	72 X 68	ALB0296910R - AB

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: Jennifer A. Hoines Area Director

Signature of Additional Legal Owner and Title, IF APPLICABLE: _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>SKAGIT</u>	Signed or attested before me on <u>JULY 20, 2006</u>
	by <u>TUANA L JONES</u> PRINT NAME OF LEGAL OWNER	Signature _____ NOTARY OR AGENT
	by <u>USDA Rural Development</u> PRINT NAME OF LEGAL OWNER	<u>JENNIFER A HOINES</u> PRINTED NAME OF NOTARY
Title <u>SFH Specialist</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR <u>3/29/07</u> Notary Expiration Date	

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

Lot 55, SAMISH RIVER PARK, DIVISION NO. 1, according to the plat thereof recorded in Volume 9 of Plats, pages 43 and 44, 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) <u>Oakwood Homes</u>	WA DEALER NUMBER <u>69727</u>	DATE OF SALE <u>2/16/04</u>
PURCHASE PRICE <u>99,231.</u>	TAX JURISDICTION/TAX RATE <u>8.0</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>

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>Gabrielle Clay</u>	COUNTY OFFICE/FS OPERATOR NUMBER <u>2901/27</u>
SIGNATURE <u>[Signature]</u>	DATE <u>7-24-06</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,



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