



200708230086

Skagit County Auditor

8/23/2007 Page

1 of

2:10:35AM

RETURN ADDRESS

FLORIE NE DAILEY  
7858 S.E. 28th ST, Apt 415  
MERCER ISLAND, WA. 98040

**MANUFACTURED HOME LICENSING 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**  
TPQ / PLATE NUMBER: 018989 YEAR: 1992 MAKE: FLEETWOOD LENGTH/WIDTH(FEET): 28X66 VEHICLE IDENTIFICATION NUMBER (VIN): WAFLM31A10102BA

**2 LAND** LEGAL DESCRIPTION ON PAGE  
MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER: 3938-001-127-0057

LOT: 127 BLOCK: 1 PLAT NAME OR SECTION/TOWNSHIP/RANGE: Subdiv #2 Lake Cavanaugh QUARTER/QUARTER SECTION: 1/4

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** ADDITIONAL NAMES ON PAGE  
COUNTY NUMBER: NUMBER OF REGISTERED OWNERS: NUMBER OF LEGAL OWNERS: 1

NAME OF REGISTERED OWNER: FLORIE NE DAILEY DOL CUSTOMER ACCOUNT NUMBER:

NAME OF ADDITIONAL REGISTERED OWNER: DOL CUSTOMER ACCOUNT NUMBER:

ADDRESS: 33677 SO. SHORE DR. CITY: MOUNT VERNON WA. STATE: WA. ZIP CODE: 98274

NAME OF ADDITIONAL LEGAL OWNER: DOL CUSTOMER ACCOUNT NUMBER:

ADDRESS: CITY: STATE: ZIP CODE:

**GRANTEE**  
NAME: FLORIE NE DAILEY

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  
Signature of Additional Registered Owner and Title, IF APPLICABLE

**WARREN G. OTTESON**  
STATE OF WASHINGTON  
NOTARY - - - PUBLIC  
MY COMMISSION EXPIRES 10-20-08

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**  
State of Washington County of SKAGIT Signed or attested before me on 8/22/07  
by FLORIE NE DAILEY Signature: Florie Ne Dailey  
by WARREN G. OTTESON Signature: Warren G. Otteson  
Title: DEALERSHIP POSITION/AGENT/NOTARY AND: Dealer No. OR 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): John S. Milnor TITLE COMPANY / PHONE NUMBER: Guardian NW Title 424-015  
SIGNATURE / POSITION: Senior Title Officer DATE: 8/21/2007  
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): Timothy DeVries BLDG PERMIT OFFICE/PHONE #: 360-336-9410 BLDG PERMIT #: 23214  
SIGNATURE / POSITION: Timothy DeVries BUILDING OFFICIAL DATE: 8/22/07

UNRECORDED

MANUFACTURED HOME - FROM SECTION 1				
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	1992	FLEETWOOD	28 X 66	WAFLM31A10102BA

**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 of Additional Legal Owner and Title, IF APPLICABLE \_\_\_\_\_

**WARREN G. OTTESON**  
 STATE OF WASHINGTON  
 NOTARY --- PUBLIC  
 MY COMMISSION EXPIRES 10-20-08

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
State of Washington County of <u>SKAGIT</u>	Signed or attested before me on <u>8/22/07</u>
by <u>FLORENE A DAILEY</u> PRINT NAME OF LEGAL OWNER	Signature <u>Florence A Dailey</u> NOTARY OR AGENT
by _____ PRINT NAME OF LEGAL OWNER	Signature <u>WARREN G OTTESON</u> PRINTED NAME OF NOTARY
Title _____	County/Office No. OR _____
DEALERSHIP POSITION/AGENT/NOTARY _____	AND: Dealer No. OR _____ Notary Expiration Date _____

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

LAND DESC.  
 LOT 127, Block 1 Subdivision #2 of Lake  
 CAVANAGH

**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)	COUNTY OFFICE/VES OPERATOR NUMBER
<u>Youa Vang</u>	<u>2901/25</u>
SIGNATURE	DATE
<u>Youa Vang</u>	<u>8/23/07</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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