



200710090112

Skagit County Auditor

10/9/2007 Page 1 of 2 3:44PM

RETURN ADDRESS

LAND TITLE OF SKAGIT COUNTY

119561-PAe

WASHINGTON STATE 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)
	1973	Newmoon	40 X 24	1184556 WA SD 4024A73290115

2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER P59424/3822-000-033-0001

LOT	BLOCK	PLAT NAME OF SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
33		Skyline No. 6	

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	2	1

NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER		
James N. Ray			
NAME OF ADDITIONAL REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER		
Terry E. Ray			
ADDRESS	CITY	STATE	ZIP CODE
316 SE Pioneer Way #140	Oak Harbor	WA	98277
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER		
Washington Federal Savings			
NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER		
Loan No. 312893-1			
ADDRESS	CITY	STATE	ZIP CODE
1017 Commercial Avenue	Anacortes	WA	98221

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 *Terry E. Ray*

Signature of Additional Registered Owner and Title, IF APPLICABLE _____

NOTARY SEAL: JENNIFER J. LIND, COMMISSION EXPIRES 10-01-10, NOTARY PUBLIC, STATE OF WASHINGTON

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skagit Signed or attested before me on 5-10-07

Terry E. Ray Signature of REGISTERED OWNER

James N. Ray Signature of REGISTERED OWNER

Jennifer J. Lind PRINTED NAME OF NOTARY

Title Notary AND: County/Office No. OR 10/01/2010 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) _____ 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 #
E. Dean Frank	360-293-1901	11910
SIGNATURE / POSITION	DATE	
<i>E. Dean Frank</i>	Building official	5/7/07

MANUFACTURED HOME - FROM SECTION 1				
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	1973	Newmoon	40 X 24	1184556 WASD 4024 A 732901/5

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 MARLA VALLEE, VICE PRESIDENT & MANAGER
 Signature of Additional Legal Owner and Title, IF APPLICABLE [Signature]

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>SKAGIT</u>	Signed or attested before me on <u>05/07/07</u>
	by <u>WASHINGTON FEDERAL SVGS</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by <u>MARLA VALLEE, VP & MGR</u> PRINT NAME OF LEGAL OWNER	<u>KIM A FAIR</u> PRINTED NAME OF NOTARY
Title <u>NOTARY</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR <u>06/29/10</u> 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)

Lot 33, "SKYLINE NO. 6", as per plat recorded in Volume 9 of Plats, pages 64 through 67A, inclusive, records of Skagit County, Washington.
 Situate in the City of Anacortes, County of Skagit, State of 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>YOUNG VANG</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>2901/25</u>
SIGNATURE <u>[Signature]</u>	DATE <u>10-9-07</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 accomod



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