

RETURN ADDRESS

James Jauron
5139 Tenneson Road

Sedro Woolley, WA 98284

200807240061
Skagit County Auditor

7/24/2008 Page

1 of

211:40AM

B92998

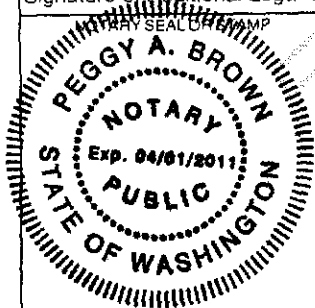
STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION	
				<input type="checkbox"/> TRANSFER IN LOCATION	
				<input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
Anyone who knowingly makes a false statement 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)	
	2009	AMERICANA	74 X 70	OREF848A32246 - AE13 OREF848B32246 - AE13	
2 LAND					
LEGAL DESCRIPTION ON PAGE AE13					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER (P51193) 360531-1-003-1009 (P51179)					
LOT	Section 31, Block	Township 36, Range 5, Pth NE NE and Tracts	Quarter/Quarter Section 10 and 11 of Survey No. 800321		
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER 1		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
NAME OF REGISTERED OWNER		JAMES M. JAURON		DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		5139 Tenneson Road, Sedro Woolley, WA 98284		STATE ZIP CODE	
NAME OF LEGAL OWNER		Sterling Trust Company		DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		336A East Fairhaven Avenue, Burlington, WA (8233		STATE ZIP CODE	
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					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY SEAL OR SIGNATURE		State of Washington Skagit County of		Signed or attested before me on 12-6-07	
KAREN ALDERSON		XXXXXXXXXXXX		Signature Karen Alderson	
My Appointment Expires Mar 28, 2011		PRINT NAME OF REGISTERED OWNER James M. Jauron		NOTARY OR AGENT Karen Alderson	
		PRINT NAME OF REGISTERED OWNER Notary		PRINTED NAME OF NOTARY	
		Title		County/Office No. OR 3-28-11	
		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)		Guardian Northwest Title & Escrow			
Karen Alderson		(360) 395-3050			
SIGNATURE / POSITION		Escrow Officer		December 6, 2007	
Karen Alderson				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: <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)		BLDG PERMIT OFFICE/PHONE # 360-336-9410		BLDG PERMIT #	
LORI ANDERSON		SKAGIT COUNTY PLANNING		BP08-0215	
SIGNATURE / POSITION		Per Anderson		DATE 7/23/08	
		PERMIT TECHNICIAN			

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

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington
County of SkagitSigned or attested
before me on 12-13-07by Kent Haberly
PRINT NAME OF LEGAL OWNERSignature Peggy A. Brown
NOTARY OR AGENTby
PRINT NAME OF LEGAL OWNERPRINTED NAME OF NOTARY Peggy A. BrownTitle
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR 4-1-11
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's**

Legal description attached hereto and made a part thereof

Section 31, Township 36, Range 5; Ptn. NE NE; and
Tracts 10 and 11 of Survey No. 800321**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)

Coach Corral

WA DEALER NUMBER

4278

DATE OF SALE

7-22-08

PURCHASE PRICE

125,000

TAX JURISDICTION/TAX RATE

8.0

DEALER'S AUTHORIZED SIGNATURE

Ray P. Acherson☐ **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)

Gabrielle Clay

COUNTY OFFICE/VFS OPERATOR NUMBER

2901-27

SIGNATURE

G. Clay 2901-27

DATE

7.24.08**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
If you need special accommod200807240061
Skagit County Auditor