



200902130074

Skagit County Auditor

RETURN ADDRESS

2/13/2009 Page 1 of 2 1:43PM

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)
	1990	Pres	28X60	177D59116

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER **P68930**

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
75-77		Bank River Estates	18/34N/1DEW

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

ADDITIONAL NAMES ON PAGE

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

NAME OF REGISTERED OWNER **Joanne E. Bell**

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS	CITY	STATE	ZIP CODE
14935 SR. 530	Concrete	WA	98237

NAME OF LEGAL OWNER ~~Joanne E. Bell~~ **Summit Bank**

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS	CITY	STATE	ZIP CODE
PO Box 805	Burlington	WA	98233

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 **Joanne E. Bell**

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 **10/8/2008**

by **Joanne E Bell** Signature **[Signature]**
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by **Joshua Michael Top**
PRINTED NAME OF NOTARY

Title **Notary Public** AND: County/Office No. OR Dealer No. OR **4-01-2012**
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 #
Kate Sharp	360-336-9410 x5780	BP08-0933

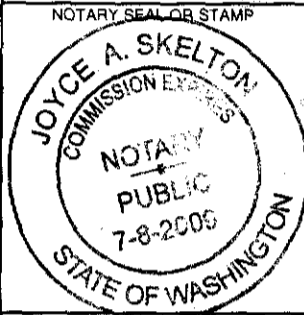
SIGNATURE / POSITION	DATE
Kate Sharp Permit Tech.	10-15-08

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]* Loan Officer for Summit Bank

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 10-15-08
by JOSH TOP FOR SUMMIT BANK Signature *[Signature]*
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT
by Joyce A. Skelton
PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY
Title Notary Public AND: County/Office No. OR 7/8/09
DEALERSHIP POSITION/AGENT/NOTARY 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)

LOTS 75, 76, 77 Sawk River Estates
AKA - 14935 S.R. 530 Concrete, WA 98237

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>Shannon King</u>	COUNTY OFFICE/VES OPERATOR NUMBER <u>290133</u>
SIGNATURE <i>[Signature]</i>	DATE <u>2-13-09</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 1-800-822-8889 or TDD (360) 664-8885.



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