

200903170102 Skagit County Auditor

Symmit Bank
PO Box 805

Purlington WA 98233

RETURN ADDRESS

3/17/2009 Page 1 of 2 4:04PM

Rurlington WA 98233					
_ 1 ²⁹ 41/3					
LAND TITLE OF SKAGIT COUNTY					
STATE OF WASHINGTON MANUFACTURED HOME PLEASE CHECK ONE DEPARTMENT OF WASHINGTON APPLICATION TRANSFER IN LOCATION					
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 LENGTHWIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN)					
2 LAND LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER					
LOT 75-77 BLOCK PLAT NAME SAUK RIVER ESTATES SECTION/TOWNSHIP/RANGE IS -34N-10 EWM					
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS					
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 ADDITIONAL LEGAL DWNER					
NA					
ADDRESS CITY 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 Journe 6. Cold					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTATY SEALCH STAND NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
Signature of Additional Registered Owner and Title, IF APPLICABLE NOTATY SEALOR STAND NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE Signed or attested Defore me on 1015 2007 NOTARY Signed or attested Defore me on 1015 2007					
County of County					
by State of Province Owner Signature					
4-01-2012 6 by Joshua Michael To					
Title Detary Public AND: County/Office No. OR 4-01-2012					
DEALERSHIP POSITION/ASENT/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) JOHN S. Milhor Guardian NW MitteCo. 424-0115					
SIGNATURE POSITION S. Melnoz - Se. Vitte Offices Oct. 15,2008					
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.					
5 BUILDING PERMIT OFFICE CERTIFICATION I have the standard of the manufactured home has been affixed to the real property as described.					
I certify that: ☐ 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 #					
NAME (TYPED ON PAINTED)					
SIGNATURE / POSITION DATE					

6 SIGNATURE OF L	EGALOWNER			
	AL OWNER INDICATES CON	SENT FOR ELIMINATION	ON OF TITLE / REMOVAL	FROM REAL PROPERTY.
,	Legal Owner and Title, IF APP	4	LOAN Offices	^ .
Signature of Additiona	Legal Owner and Title, IF APP	LICABLE	<u> </u>	- CANTR
NOTATIV SEAL DIAST	AMP NOTAR	ZATION/CERTIFICATION	ON FOR LEGAL OWNER(S	SIGNATURE
L'ELISION EXPRES	State of Washington County of	Symin	Signed or attested before me or	10-15-08
	by Summi	4 BANIZ GALOWNER	Signature	GENT SKELL
STATE OF WAS	Title DOTA	er Public		flice No. OR 7/8/69
	DEALERSHIP POSIT	ION AGENT/NOTARY		oiration Date
C 4	ON (A legal description of th	e land can be obtained	rom the local County Ass	sessor's Office
plat re second	ecorded in Vo	lat of Son clame Sof County,	b River Est Plats, Page Washingto	ates as pen as 13 and 14,
				and the second s
The second secon	- The second sec	A Secretary of the Secr		
DEALER'S REPO	RT OF SALE		/-	
	IIS INFORMATION IS CORRE	CT. THE VEHICLE IS CL	EAR OF ENCUMBRANCE	S EXCEPT AS SHOWN.
ANY REQUIRED SA	ALES TAX HAS BEEN COLLE		The state of the s	
DEALER NAME (TYPED OR	-KINTED]		WA DEALER NUMBER	DATE OF SALE
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIG	NATURE	
USE TAX EX	EMPT Sale to a Certified Tribal	member on the reservation	on (attach notarized stateme	ent of delivery).
COUNTY AUDITO	R/AGENT LICENSING OFFICE	E APPROVAL: (Not for	use by Subagents)	
certify that the above as	oplication appears to have been c n.	completed correctly, and th	ne applicant has sufficient do	cumentation to proceed with
VAME (TYPED OR PRINTED	7		COUNTY OFFICE/VFS OPERAT	OR NUMBER 1
SIGNATURE (Lowesy		\perp 240108	
The same of the sa	Mileun			217 06
O TITLE FEES				
	APPLICATION MOBILE HO	OME FEE ELIMINATION	FEE USE TAX	SUBAGENT FEES
		······································		TOTAL REES & TAX
IMPORTANT:	Once the application has Licensing Office, take you Retain proof of the recon your original application	our application form to rding fees paid. If the	the County Recording Recording Office retain	Office.
ADDITION			Vehicle Licensing office	
AFFLI	Manufactured H		ing all required fees. Ve	
	tructions on completing this r in Location, see form TD-			

The Department of Licensing has If you need special accommodat

