

RETURN ADDRESS



200911130081

Skagit County Auditor

11/13/2009 Page

1 of

2 1:14PM

**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**

TRG / PLATE NUMBER \$53004	YEAR 88	MAKE Lobo	LENGTH/WIDTH(FEET) 16' X 28'	VEHICLE IDENTIFICATION NUMBER (VIN) 09L22762XU
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**2 LAND**

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
241124

LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE Section 13, Township 35N, Range 6E	QUARTER/QUARTER SECTION SE Quarter of the NE Quarter
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**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)**

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER Nicholis L. Bates	DOL CUSTOMER ACCOUNT NUMBER BATESNL395M4
NAME OF ADDITIONAL REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER

ADDRESS 35936 Ottera Rd	CITY Sedro-Woolley	STATE WA	ZIP CODE 98284
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NAME OF LEGAL OWNER Whidbey Island Bank	DOL CUSTOMER ACCOUNT NUMBER 151000341
NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER

ADDRESS PO Box 1589	CITY Oak Harbor	STATE WA	ZIP CODE 98277
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NAME Nicholis L. Bates
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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 *Nicholis Bates*

Signature of Additional Registered Owner and Title, IF APPLICABLE

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**

	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>11/9/2009</u>
	by <u>Nicholas L. Bates</u> PRINT NAME OF REGISTERED OWNER	Signature <i>Nicholas L. Bates</i> NOTARY OR AGENT
	by _____ PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY <u>Alina J. Oudman</u>
	Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR <u>10/15/13</u> 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) <u>Georgine Rossion</u>	BLDG PERMIT OFFICE/PHONE # <u>Skagit County Planning &amp; Development 336-9410</u>	BLDG PERMIT # <u>19052</u>
SIGNATURE / POSITION <i>Georgine Rossion</i> Permit Technician	DATE <u>11/12/09</u>	

**MANUFACTURED HOME - FROM SECTION 1**

TPO/PLATE NUMBER <b>E53004</b>	YEAR <b>88</b>	MAKE <b>Lib</b>	LENGTH/WIDTH(FEET) <b>64X28</b>	VEHICLE IDENTIFICATION NUMBER (VIN) <b>09L22762XU</b>
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**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 **Les L. Moller v.p.**

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 **11/13/2009**

by **Whidbey Island Bank**  
**Les L. Moller v.p.** Signature **[Signature]**  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

by \_\_\_\_\_  
PRINT NAME OF LEGAL OWNER **Alina J. Audman**  
PRINTED NAME OF NOTARY

Title **notary** AND: County/Office No. OR Dealer No. OR Notary Expiration Date **10/15/13**

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

**THAT PORTION OF THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 13, TOWNSHIP 35 NORTH, RANGE 6 EAST, W.M., LYING NORTHERLY OF THE NORTHWEST BOUNDARY OF ALDER CREEK AND NORTHERLY OF THE GREAT NORTHERN RAILWAY COMPANY'S RIGHT-OF-WAY.**

**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 identification to proceed with the recording of this form.

NAME (TYPED OR PRINTED) <u><b>Shannon King</b></u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u><b>29/01/33</b></u>
SIGNATURE <u><b>[Signature]</b></u>	

**10 TITLE FEES**

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	TOTAL FEES & TAX
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**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 (360) 902-3600 or TTY (360) 664-8885.



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