



201205030050

Skagit County Auditor

5/3/2012 Page 1 of 2 12:39PM

RETURN ADDRESS

First American Title Company - 5271237

Attn: Tammy Linville

1860 Compton Ave.

Corona, CA 92881

		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)	
&187917	2001	SKYLINE	28 X 66	21910253N	
2 LAND LEGAL DESCRIPTION ON PAGE <u>2</u>					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER P66769	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
SKAGIT	1		1		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Mobley, Van					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Mobley, Kathleen					
ADDRESS		CITY	STATE	ZIP CODE	
33346 S Shore Drive		Mount Vernon	WA	98274	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
GMAC Mortgage					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
P.O. Box 79135		Phoenix	AZ	85062	
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 <i>Van Mobley</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Kathleen Mobley</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <u>Skagit</u>		Signed or attested before me on <u>Dec 2nd 2011</u>	
		by <u>Van M Mobley</u>		Signature <u>Lorena Cisneros</u>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by <u>Kathleen Mobley</u>		Signature <u>Lorena Cisneros</u>	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY		County/Office No. OR Dealer No. OR <u>May 04 2013</u>	
Title <u>Notary Public</u>		DEALERSHIP POSITION/AGENT/NOTARY		AND: 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: <input type="checkbox"/> the manufactured home has been affixed to the real property as described.					
<input checked="" 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 #		BLDG PERMIT #	
<u>Cindy Gauthier</u>		<u>360-336-9410</u>		<u>BP00-1145</u>	
SIGNATURE / POSITION		DATE			
<i>Cindy Gauthier</i>		<u>3-14-2012</u>		<u>Skagit County Planning & Development</u>	

MANUFACTURED HOME - FROM SECTION 1

TPO / PLATE NUMBER &187917	YEAR 2001	MAKE SKYLINE	LENGTH/WIDTH(FEET) 28 X 66	VEHICLE IDENTIFICATION NUMBER (VIN) 21910253N
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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 *en*

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of ~~Washington~~ Iowa County of Black Hawk Signed or attested before me on 4-30-12
 by Ginny Niedert, Authorized Officer Signature Michelle Brown
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT
 by _____ Signature Michelle Brown
PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY
 Title _____ **AND:** County/Office No. OR Dealer No. OR 112313
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date



MICHELLE BROWN
 COMMISSION NO. 199509
 MY COMMISSION EXPIRES
 November 23, 2013

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

Lot number: 118; Subdivision: Lake Cavanaugh Div 02; Block: 3; Sec/TWN/RNG/MER: Sec 27 TWN 33n RNG 06E; Tract: 9512001326

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/VFS OPERATOR NUMBER <u>29101/33</u>
SIGNATURE <u>[Signature]</u>	DATE <u>5-3-12</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.

We are committed to providing equal access to our services. '16.

