201911210101

11/21/2019 03:37 PM Pages: 1 of 6 Fees: \$108.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

Carol Bates 9476 Soren Rd Sedro Woolley, WA: 98284

> CHICAGO TITLE 420039371

WASHINGTON STATE DEPARTMENT OF LICENSING

Manufactured Home Application

•	
Please check one:	
✓ Title Elimination	
Transfer in Leastion	

<u> </u>			30.			☐ Removal from Real Prope	
Manufactured				T	T		
Title purpose only (TPO)/Plate no. Yes \$20717		Year 1977			Vehicle identification no. (VIN) 03910396L		
2 Land							
-Manufactured home will be Real property ✓ Affixed ☐ Removed Tax parcel no. P42941 Le				Leg	al descripti	ion on page	
Lot Block Plat name or Section/Township/Range 18/35 North 7 East				Quarter/Quarter section			
3 Grantor(s) Re	gistere	d/Legal	Owner(s) -	Additional names	on page _		
County no.	No.	registered ow	vners No. legal	owners Grantee na	me (if applica	able)	
Name of registered owner Carol Bates	r					Washington driver license or UBI no.	
Name of additional registe	ered owne	r				Washington driver license or UBI no.	
Address (Address City S 9476 Soren Rd Name of legal owner Same as above			1ey, 98284			Washington driver license or UBI no.	
Name of additional legal owner					Washington driver license or UBI no.		
Address (Address, City S	tate, ZIP d	code)					
I certify under pena owner(s) of this mai	lty of pe nufactur	rjury unde ed home a	er the laws of the and the foregoi	ne state of Washinging information is to arol Bute	rue and co	am/we are the registered rrect.	
Date and place (city or co	ounty) sigr	ied	Regi	stered owner signature	alliser	Title, if signing for a busin	
Date and place (city or co	unty) sigr	ied	Regi	stered owner signature	atto	enequal Title, if signing for a busing	
Notarization/Certific	ation	Sta	ate of	, County	/ of	U face	
		Sig	ned or attested I	before me on			
(Seal or stamp) See all	iche	by A	Print registered ov	vner name	by 	registered owner name	
ge as		- ,	Notary printed or s	stamped name	Nota	ry signature	

TD-420-729 (R/8/16)WA Page 1 of 3

Continued on next page

State of Washington	
County of Skegit	
I certify that I know or have satisfactory ev	idence that
this instrument, on oath stated that (he/s)	me, and said person acknowledged that (he/she)they) signed whey) was authorized to execute the instrument and Carol Bates to be the free and voluntary act of such party for instrument.
Dated: 11/20/19	Devoich (95)
	Name: Debosel & Flick Notary Public in and for the State of 10 th
	Residing at: 1000 S/19/22

Manufactured home TPO/Plate nu			
PRINT or TYPE Name of person signing		Title company name	
Position			(Area code) Telephone no.
I certify that the legal description of	the land and ownership	is true and correct a	ccording to the real property records.
	<u>X</u>		
_//	Signature		Date
Building Permit Office Ce	rtification		
l certify that			
the manufactured home has be			annested upon completion
a building permit has been issued	tor this purpose and th		Building permit no.
PRINT or TYPE Name of person signing Pamela G. Au	dridge	Building permit office	NA M19-0018
Position	xiioge	(1000.	(Area code) Telephone no.
Dermit Toch.			V
7.011	D	1 4	400-0
C 2	x 90	mula D.	Thanks 1114.19
//	Signature		O Date
Signature of Legal Owner	(s)		
, Signature of legal owner indicates	consent for Elimination	of Title or Removal f	rom real property.
	4		1/ 1/
	XCaro	e bates by	aren J. alleson
	Legal owner	er signature aff Mind	y who fact Title, if signing for a business
	<u>X</u>		
	Legal owner	er signature	Title, if signing for a business
Notarization/Certification	State of Was	, County of	
	§igned or attested before	mo on	
	Signed of allested before	Title ou	
(Seal or stamp)	Print legal owner name	by _	rint legal owner name
Solad	riini legal owner name		Tint legal Owner marie
G2,	Notary printed or stampe		lotary signature
П	Title	and _	Dealer/county office number or notary expiration
1			
Land Description	-		
Legal description of land			
- 11	1 1 ,	Das	4
See attach	ed Legal	DESCHIO	011/04/2
	0		

State of Washington
County of Skasit
I certify that I know or have satisfactory evidence that
(seare the person(s) who appeared before me, and said person acknowledged that (he she they) signed this instrument, on oath stated that (he she they) was authorized to execute the instrument and acknowledged it as the Attorney in Fact of Carol Bates to be the free and voluntary act of such party for the uses and purposes mentioned in the instrument.
Name: Deburation WA Notary Public in and for the State of Residing at: My appointment expires: 9/19/22

B Dealer F	Report of Sale - S	elling dealer complete	this section				
PRINT or TYPE Dealer name				Washington dealer no.			
Date of sale	Pu	rchase price	Tax juris	Tax jurisdiction/Tax rate			
☐ Sales Tax	Exempt - Sale to a C	Certified Tribal membe	r on the reservation	(attach notarize	ed statement of delivery).		
		nder the laws of the s cumbrances except a					
Daté and place (city or county) signed	Dealer a	uthorized signature	·			
County	Auditor/Agent Lic	ensing Office App	proval (not for use	by subagents)			
PRINT or TYPE		1011	County office/VFS of				
I certify that a documentation	the above application on to proceed with th	appears to be comple e recording of this fort X Signatur	\overline{n}	the applicant ha	s sufficient		
0 Title Fe	es		<i>V</i>				
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees		
				<u> </u>	Total fees and tax		

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 46.12.750



LEGAL DESCRIPTION

Order No.: 620039371

For APN/Parcel ID(s): P42941 / 350718-0-001-0209

Tract 1 of SKAGIT COUNTY SHORT PLAT NO. 103-78, approved July 6, 1979 and recorded July 10, 1979 under Auditors File No. 7907100001, in Book 3 of Short Plats, page 137, records of Skagit County, Washington, being a portion of Government Lot 1 of Section 18, Township 35 North, Range 7 East, W.M. Skagit County, Washington.

Situated in Skagit County, Washington.