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02/17/2022 02:26 PM Pages: 1 of 3 Fees: \$205.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

Chicago Title
425 Commercial Street
Mount Vernon WA 98273



Manufactured Home Application

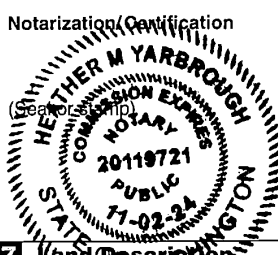
Please check one:

- Title Elimination
Transfer in Location
Removal from Real Property

For full instructions on completing this form, see Manufactured Home Application Instructions, form TD-420-730.

1 Manufactured Home
Title purpose only (TPO)/Plate no. 09L23998
Year 1990
Make LIBH
Length/Width (feet) 14 x 70
Vehicle identification no. (VIN) 09L23998
2 Land
Manufactured home will be Affixed
Real property Tax parcel no. P68763/P68766
Legal description on page 2
3 Grantor(s) Registered/Legal Owner(s) - Additional names on page
County no. No. registered owners No. legal owners Grantee name
Name of registered owner PETE WENGER
Name of additional registered owner PENNY WENGER
Address 18695 JOLLY ROAD BURLINGTON, WA 98223
Name of legal owner SAME AS REGISTERED OWNER
Name of additional legal owner
Address
I certify under penalty of perjury under the laws of the state of Washington that I am/we are the registered owner(s) of this manufactured home and the foregoing information is true and correct.
2/9/22 Mount Vernon
2/9/22 Mount Vernon
Notarization
HEATHER M YARBROUGH
COMMISSION EXPIRES 20110721
PUBLIC 11-02-24
STATE OF WASHINGTON
Notary
Pete Wenger
Penny Wenger
Notary printed or stamped name
Notary signature
Notary and
Dealer/county office number or notary expiration

Manufactured home TPO/Plate or Vehicle Identification number (VIN) 09L23998

<b>4. Title Company Certification</b>		
PRINT or TYPE Name of person signing Heather Yarbrough	Title company name Chicago Title	
Position Escrow	(Area code) Telephone no. 3604457059	
I certify that the legal description of the land and ownership is true and correct according to the real property records.		
X <u>Heather Yarbrough</u> Signature		<u>2-9-2022</u> Date
<b>5. Building Permit Office Certification</b>		
I certify that <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.		
PRINT or TYPE Name of person signing Lori M. ANDERSON	Building permit office Skagit County	Building permit no. 22017
Position PERMIT TECHNICIAN	(Area code) Telephone no. 360-416-1320	
X <u>Lori M Anderson</u> Signature		<u>2-16-2022</u> Date
<b>6. Signature of Legal Owner(s)</b>		
Signature of legal owner indicates consent for Elimination of Title or Removal from real property.		
X <u>Pete Wenger</u> Legal owner signature		Title, if signing for a business
X <u>Penny Wenger</u> Legal owner signature		Title, if signing for a business
Notarization/Certification	State of <u>Washington</u> County of <u>Skagit</u>	
	Signed or attested before me on <u>2/9/22</u>	
	by <u>Pete Wenger</u> Print legal owner name	by <u>Penny Wenger</u> Print legal owner name
	<u>Heather M Yarbrough</u> Notary printed or stamped name	<u>Heather Yarbrough</u> Notary signature
	<u>Notary</u> Title	and X <u>1102/24</u> Dealer/county office number or notary expiration
	<b>7. Land Description</b>	
Legal description of the land		
LOT 69, SAMISH RIVER PARK, DIVISION NO. 1, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 9 OF PLATS, PAGES 43 AND 44, RECORDS OF SKAGIT COUNTY, WASHINGTON.		
SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.		

Manufactured home TPO/Plate or Vehicle Identification number (VIN) 09L23998

<b>8 Dealer Report of Sale</b> – Selling dealer complete this section					
PRINT or TYPE Dealer name				Washington dealer no.	
Date of sale	Purchase price		Tax jurisdiction/Tax rate		
<input type="checkbox"/> Sales Tax Exempt – Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
I certify under penalty of perjury under the laws of the state of Washington that this information is correct. The manufactured home is clear of encumbrances except as shown. Any required sales tax has been collected.					
Date and place (city or county) signed			X Dealer authorized signature		
<b>9 County Auditor/Agent Licensing Office Approval</b> (not for use by subagents)					
PRINT or TYPE Name <i>Denise Hindman</i>			County office VFS operator no. <i>2901 VCR</i>		
I certify that the above application appears to be completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.					
			X <i>Denise Hindman</i> Signature Date <i>2-17-22</i>		
<b>10 Title Fees</b>					
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees
					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