

Island Anacortes

Title Elim

5  
2  
7

9112230134

**Manufactured Home:**

Year 1974 Make WESTM Width 24 Length 56  
Vehicle Identification Number 62HV-1 05206 778U PA4878 ONLY NUMBERS AVAILABLE

**Registered Owners:**

Names VICTORIA A. BERTHELOTE  
JAMES C. WALTER

Signatures<sup>1</sup>

*Victoria A. Berthelote*  
*James C. Walter*

**Legal Owners:**

Names VICTORIA A. BERTHELOTE  
JAMES C. WALTER

Signatures<sup>1</sup>

*Victoria A. Berthelote*  
*James C. Walter*

<sup>1</sup>SIGNATURES OF OWNERS INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 RCW AND INDICATE INTENT TO PERFECT INTEREST IN THE MANUFACTURED HOME AS REAL PROPERTY WITH THE LAND HE/SHE/THEY OWN AND TO WHICH IT IS/IS BEING AFFIXED.

**Land to Which Manufactured Home is Being Affixed:**

Property Tax Parcel Number 3822-000-027-0009

Legal Description Lot 27, Division 6 Skyline

Owners' Names VICTORIA A. BERTHELOTE  
JAMES C. WALTER

Signatures<sup>2</sup>

*Victoria A. Berthelote*  
*James C. Walter*

<sup>2</sup>SIGNATURES OF OWNERS INDICATE CONSENT TO HAVE THE MANUFACTURED HOME ADDED TO THE REAL PROPERTY LISTED ABOVE.

**Building Permit Office Certification:**

I certify that the manufactured home has been affixed to the real property as described above and/or building permit number 3550 has been issued for the purpose of affixing the manufactured home to the land and will be inspected upon completion. Permit Issued 8-5-77

Lyle Cornish City of Anacortes 12-18-91 (206) 293-1901  
NAME SIGNATURE BLDG. PERMIT OFFICE DATE PHONE NUMBER

**County Auditor/Agent Licensing Office Approval: (Not for use by subagents)**

I certify that the above application appears to have been completed correctly, and that the applicant has sufficient documentation to proceed with the recording of this form.

CRYSTAL R. FERRIS Crystal R. Ferris #2901-10  
NAME SIGNATURE OFFICE/CAAP OPERATOR NUMBER

**Recording Office:**

I certify that this form has been recorded in the county records.

Cheryl Dingman Skagit 12-23-91  
NAME SIGNATURE COUNTY DATE

9112230134

**Note:** Every person who falsifies or intentionally omits material information required in an affidavit is guilty of a gross misdemeanor punishable in accordance with RCW 9A.20.021.

9112230134

BK1035PG0441