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NOTHINEST TELCO CIL	a contract of the contract of	the state of the s	

NRTHWEST TELCO CU 2821 COLBY AVE EVERETT. WA 98201
Manufactured Home: 9303190005
Year 1989 Make BUCKH Width 28 Length 66
Vehicle Identification NumberAB7SC48460R
Registered Owners: Greg Knight Streng A. Knight
Names Shelley C. Knight Signatures Signatures Signatures
Legal Owners:
Names Northwest Telco Credit Union Signatures Ant Dollar - John High
'SIGNATURES OF OWNERS INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 ROW 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 330428-1-005-0305
Legal Description see attached Greg Knight One of the see attached to the see attach
Owners' Names Shelley C. Knight Signatures Signatures
SIGNATURES OF OWNERS INDICATE CONSENT TO HAVE THE MANUFACTURED HOME ADDED TO THE REAL PROPERTY ISTED ABOVE.
Building Permit Office Certification:
Certify that the manufactured home has been affixed to the real property as described above and/or building permit
number has been issued for the purpose of affixing the manufactured home to the land and will be inspected upon completion.
JISH AMPBELL lisk Compbell SKAGIT COUNTY 3/18/93 206/376-9410
SIGNATURE BLOG 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.
Anna Rama (125 79-63)
NAME SIGNATURE OFFICE/CAAP OPFRATOR NUMBER DATE
Recording Office:
gertify that this form has been recorded in the county records.
New Maggired Staget 3/19/93
PACHE COUNTY DATE RECORDING NUMBER 9303190005

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.





MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT LEGAL DESCRIPTION OF LAND

This form is to be used when there is not sufficient room on TD-420-729, TD-420-730, or TD-420-731 to provide the legal description of the land. This form must be recorded with the Manufactured Home Form, and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check type of application:

▼ Title Elimination

Removal From Real Property

☐ Transfer In Location

Land: Property Tax Parcel Number 330428-1-005-0305

Legal Description:

The South 1/2 of the East 25 acres of the southeast 1/4 of the Northeast 1/4 of Section 28, Township 33 North, Range 4 East, W.M.; EXCEPT County Road alon the South line thereof, AND EXCEPT mineral reights reserved by English Lumber Company in deed recorded January 16, 1913, under Auditor's File No. 94681.

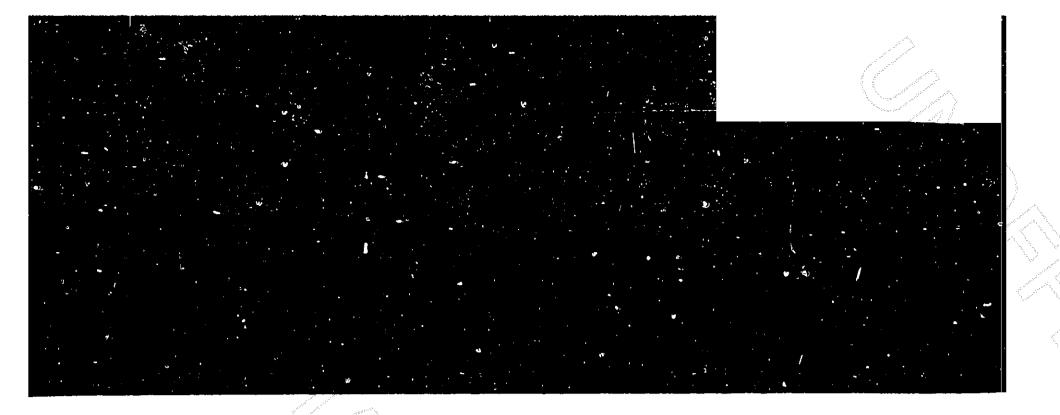
Recording Office of County In Which Real Property Is Located I certify that this form has been recorded in the county records.

NAME

SIGNATURE

COUNTY

RECORDING NUMBER





MANUFACTURED HOME APPLICATION—ADDITIONAL ATTACHMENT OWNERSHIP

the owners' names. This form must be recorded with	oom on TD-420-729, TD-420-730, or TD-420-731 to provide the Manufactured Home Form, and a certified copy presented documentation for a Manufactured Home application.
Check type of application: Title Elimination Removal From Real Pr Transfer In Location	operty
Property Tax Parcel Number: 330428-1-005-0305	
Owners:	
NameGreg Knight	_Signature Dries a might
Name Shelley C. Knight	
Name	Signature
Check Applicable Statements:	
	wners indicate termination of interest in the manufactured home and indicate intent to perfect interest in the manufactured home as which it is/is being affixed.
☐ Signatures of owners indicate consent to have the	manufactured home added to the real property listed above.
REMOVAL FROM REAL PROPERTY: Signatures of or the real property listed above and indicate intent to of Licensing as provided by chapter 46.12 RCW.	wners indicate consent to remove the manufactured home from perfect interest by filing an application with the Department
☐ TRANSFER IN LOCATION: Signatures of owners incorproperty listed above.	dicate consent to remove the manufactured home from the real
Signatures of owners indicate consent to have the swell as their intent to perfect interest in the manufand to which it is being affixed rather than through	manufactured home added to the real property listed above, as actured home as real property with the land he/she/they own h title as provided by chapter 46.12 RCW.
Recording Office of County In Which Real Property I certify that this form has been recorded in the county In the county In Which Real Property I	
NAME SIGNATURE CC	DARK / 2 PG 6 RECORDING NUMBER

TD-420-732 APP ATTACHMENT (N/2/90) Page 2 of 2

SKAGIT COUNTY BUILDING INSPECTION CARD

PERMIT

FINAL .

UBC 305 (B)

UBC 303 (B)

NO.19405

THIS CARD MUST BE POSTED ON OR NEAR BUILDING

FRONT

SIDE

REQUIRED BUILDING SET BACK

FEET FROM

PROPERTY LINE

PROPERTY LINES

FEET FROM ADJACENT

JOB ADDRESS 23	29 Bu	LSON RD	REAR	25	FEET FROM ADJACE PROPERTY LINES	NT :
FOUNDATION	APPROVED	DATE No c	concrete shall pection and a	l be poured opproval.	or steel covered wi	.thout
FOOTINGS					<u> </u>	
WALLS UNDERGROUND, PLUMB		<u> </u>	DOWES			·
Electrical is inspective Electrical should be		prior to fi	nal framing.			
FRAMING FRAMING PLUMBING INSULATION SHEET ROCK GASPIPE/MECH	APPROVED	fra	mbing to be oming/plumbing off is pre	g inspection	ime of Inspection. subsequent to elec	A combined trical

DATE

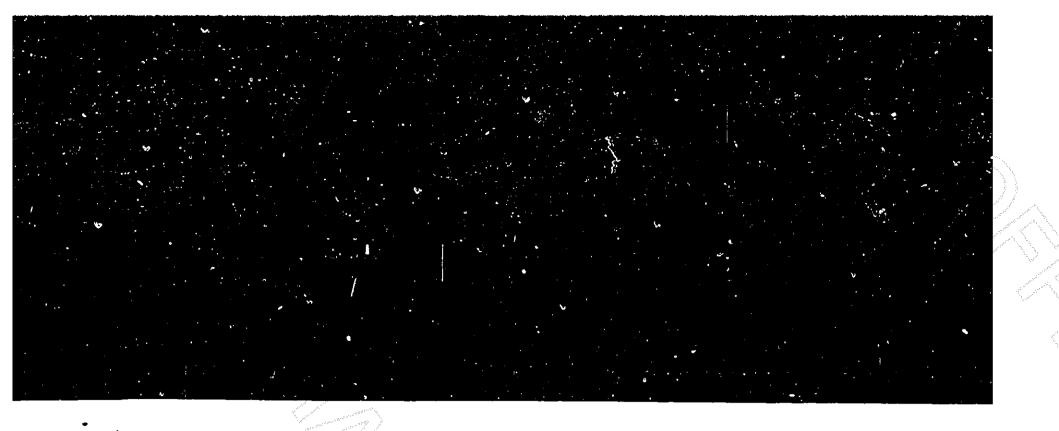
9303190005

THIS BUILDING NOT TO BE OCCUPIED UNTIL FINALED

It shall be the duty of the person doing the work authorized by permit to not the Building Official when work is ready for inspection.

The county is allowed to dispose of plans 90 days after final insperant authorized to occupy.

APPROVED



Skagit County **Building Use Permit**

336-9410

330-9410			
CONTA - NAME ADDR	ESS Comments		PHONE
KNIGHT, GREG & SHELLEY	. 2329 BULSON :	RD. MT. VERNON 44	5-6511
CONTRACTORS NAME ADDR	ESS		PHONE
HOME BASE INC.	14918 SMOKEY	PT.BLVD 659-5868	
CONTRACTOR S REGISTRATION NO		N. T.	
ACCCUNT NO	SEC TWP	PANGE	LOT SIZE
283304-1-005-0305	28 3	3 Ø4	12.5 AC
PLAT NAME	DIV LOT	BLOCK	
	,	San and the san	
ZON NO APPROVED BY	FLOODPLAIN PERMIT	HEALTH UNIT APPROVAL	SDS PERMIT #
RU DH	NA	TK	112-7
DESCRIPTION OF WORK OR USE		and the second s	/PE
MOBILE HOME			
DIMENSIONS IST FLOOR	2ND FLOOR BASE	MENT CARAGE	CARPORT
Ø Sq Ft ·			
LOCATION OF ROAD		and the state of t	
2329 BULSON RD. MT. VERN	ON	Marie Carlos	
Required Setbacks 35 0	SIDE REAR	Floodplain Elevations	
Fees	<u> </u>	NOTICE:	

1. Building 36.00 2. Plan Check 0.00 BCAC 3.50 3. Grading 0.00Energy Septic 0.00 4. Plmb/Mech 8.00 5 Other 0.00 0.00 6 Deposits 0.00 Sepa/EIS 0.00 **TOTAL** 39.50

This permit shall become null and void, if the building or work authorized by this permit is not commenced within 180 days from the date of such permit, or if the building or work authorized by such permit is suspended or abandoned at any time after the work is commenced for a period of 180 days. Work can only be determined by inspection from this office. The permit holder is responsible to see that all required inspections are made.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local laws regulating construction or the performance of construction

By signing this application I acknowledge that I am familiar with the requirements of RCW 18.27 (Registration of Contractors) and state as a condition for issuance of the building permit applied for herein, that I am either exempt pursuant to RCW 18.27.090 from registration or that my contractor's registration number as listed on this form is correct.

Special Conditions

	opeoidi conditioni	•
TIE DOWNS AND SKIRT	ING REQUIRED	
A south		
DEPARTMENT GEN	Shel	SIGNATURE OF OWNER OR AGENT READ NOTICE ABOVE
OATE PEHMIT ISSUED	VALUATION	BK 1 1 7 2 PG 0 6 1 4
### - Applicant's C 930319	Pink -	Inspector's Copy Goldenrod - Assessor's Cop