

RETURN TO: CONTINENTAL ESCROW COMPANY; 1601 WILLIAM WAY, MOUNT VERNON, WA 98273
MANUFACTURED HOME TITLE ELIMINATION APPLICATION (TITLE TO REAL PROPERTY)

T-69016

Manufactured Home: 52 **9303250090**

Year 1993 Make ARDMORE Width 28 Length 52

Vehicle Identification Number 1-12987

Registered Owners:
 Names RICHARD N. KAMMENGA Signatures' x Richard N. Kammenega
DAWN D. KAMMENGA Signatures' x Dawn D. Kammenega

Legal Owners:
 Names CONTINENTAL SAVINGS BANK Signatures' [Signature]

¹SIGNATURES OF OWNERS INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 48.12 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 3963-000-010-0007 3963-000-009-0000

Legal Description Lots 9 and 10, "Olympic View Plat, Skagit County, Washington", as per plat recorded in Volume 8 of Plats, page 1, records of Skagit County, Washington.

Owners' Names RICHARD N. KAMMENGA Signatures² x Richard N. Kammenega
DAWN D. KAMMENGA Signatures² x Dawn D. Kammenega

²SIGNATURES OF OWNERS INDICATE CONSENT TO HAVE THE MANUFACTURED HOME ADDED TO THE REAL PROPERTY LISED 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 25469 has been issued for the purpose of affixing the manufactured home to the land and will be inspected upon completion.

[Signature] SKAGIT COUNTY PERMIT CENTER 12/21/92 336-9410

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.

DEPT. OF LICENSING [Signature] 29-01-04 3/25/93

NAME SIGNATURE OFFICE/CAAP OPERATOR NUMBER DATE

Recording Office:

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

[Signature] Skagit 3/25/93 **9303250090**

NAME SIGNATURE COUNTY DATE RECORDING NUMBER

93 MAR 25 SKAGIT COUNTY DEPT. OF LICENSING

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.

9303250090

BK 1175 PG 0058