

SKAGIT VALLEY ESCROW  
333 E. FAIRHAVEN

BURTON, WASHINGTON  
Department of

**Licensing**

WA 98233  
es #94150

FIRST AMERICAN TITLE CO.

42430

**MANUFACTURED HOME APPLICATION**

**9406010118**

**TITLE OPTIONS**

- ☐ Original  
☐ Transfer  
☐ Duplicate  
☐ Release

- ☐ TITLE ELIMINATION (Complete all but section 3, below)  
☐ TRANSFER IN LOCATION (Complete ALL sections below)  
☐ REMOVAL FROM REAL PROPERTY (Complete all but section 4, below)

RECORDER'S CLOCK  
JERRY MCINTURFF  
SKAGIT COUNTY AUDITOR

94 JUN -1 P3:46

RECORDED AT  
FILED

<b>1 MANUFACTURED HOME</b>					
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)	COLOR #1 TOP OR FRONT:	COLOR #2 BOTTOM OR REAR COLOR:
1991	SEQUO	24x52	1611928465		
<b>2 LAND</b>					
• Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.					
• Land to which the manufactured home is being: <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
PROPERTY TAX PARCEL NUMBER 3877-000-132-0005					
<b>3 TITLE COMPANY CERTIFICATION</b>					
I certify that the legal description of the land and ownership are true and correct.					
NAME	TITLE COMPANY/PHONE NUMBER		SIGNATURE	DATE	
			X		
NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative.					
<b>4 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that the manufactured home has been affixed to the real property as described, or the following building permit has been issued for this purpose and will be inspected upon completion.					
NAME	SIGNATURE	DATE	PERMIT NUMBER	DATE	
Marge Swint	Marge Swint	3/23/94	3877-000-132-0005	3/23/94	
<b>5 OWNER INFORMATION</b>					
COUNTY #	INC	USBC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	FEES
					FILING FEE
NAME OF FIRST REGISTERED OWNER ERVIN B. ELLINGSON, SR.					APPLICATION
NAME OF SECOND REGISTERED OWNER AGNES M. ELLINGSON					MOBILE HOME FEES
ADDRESS OF FIRST REGISTERED OWNER 4398 BAKER DRIVE					ELIMINATION
CITY	CONCRETE	STATE	WA	ZIP CODE	98237
NAME OF FIRST LEGAL OWNER U.S. BANCORP MORTGAGE CO.					USE TAX
MAILING ADDRESS OF FIRST LEGAL OWNER 501 S.E. HAWTHORNE BLVD.					SUB-AGENT FEES
CITY	PORTLAND	STATE	OR	ZIP CODE	97214
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: <i>[Signature]</i>					TOTAL FEES & 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 of up to \$5,000 and/or 10 years imprisonment (RCW 46.11.010). I DO SOLEMNLY SWORE UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS TRUE.					<b>DEALER'S REPORT OF SALE</b>
					I certify that this information is correct. The vehicle is clear of encumbrances except as shown.
					DEALER NAME
					DATE OF SALE
					PURCHASE PRICE
					\$
					TAX JURISDICTION/TAX RATE
					DEALER'S AUTHORIZED SIGNATURE
					X
NOTARY OR LICENSE AGENT'S NUMBER					USE TAX EXEMPT (See to Indian on the Reservation (attach notarized statement of delivery))
Subscribed and sworn to before me this 20th day of June 1994					
<b>6 COUNTY AUDITOR/AGENCY LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)</b>					
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.					
NAME	SIGNATURE		OFFICE/VEH OPERATOR NUMBER	DATE	
DEPT. OF LICENSING	<i>[Signature]</i>		29-01-04	6/1/94	
RECORDING OFFICE					
This form has been recorded in the county records.					
RECORDING NUMBER	9406010118		COUNTY	VOLUME/PAGE	DATE
			Skagit		6-1-94

Order No. 42430

SCHEDULE "C"

The land referred to herein is situated in the County of Skagit,  
State of Washington, and is described as follows:

Lot 132, "CEDARGROVE ON THE SKAGIT" , as per plat recorded  
in Volume 9 of Plats at Page 48 to 51, inclusive, in the  
records of Skagit County, State of Washington.

9406010118

BK1336PG0413