



## TITLE OPTIONS

☐ Original  
☐ Transfer  
☐ Duplicate  
☐ Reissue☒ 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)MANUFACTURED HOME APPLICATION  
9406210104JERRY MCINTURFF  
SKAGIT COUNTY AUDITOR  
RECORDER'S CLOCK

'94 JUN 21 P4:00

RECORDED \_\_\_\_\_ FILED \_\_\_\_\_  
REQUEST OF \_\_\_\_\_RECORDED AT  
REQUEST OF:

MANUFACTURED HOME					
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)	COLOR #1 TOP OR FRONT:	COLOR #2 BOTTOM OR REAR COLOR:
1978	REDMOND	24X44	11808558		

LAND	
• 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 3930-000-023-0002 P66193	

TITLE COMPANY CERTIFICATION			
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.			

BUILDING PERMIT OFFICE CERTIFICATION			
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.			BLDG PERMIT # 15427
NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE NUMBER	DATE
JOANNE OSTLUND	X Joanne Ostlund Permit Tech	336-9410	4-11-94

OWNER INFORMATION			FEES			
COUNTY #	INC	UNINC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner:	FILING FEE
		X	1	1		
NAME OF FIRST REGISTERED OWNER HOUSTON; CHRISTIE D.						APPLICATION
NAME OF SECOND REGISTERED OWNER HOUSTON; CHRISTIE D.						MOBILE HOME FEES
ADDRESS OF FIRST REGISTERED OWNER 2090 LAKE 16 ROAD CITY STATE ZIP CODE MOUNT VERNON WA 98273						ELIMINATION
NAME OF FIRST LEGAL OWNER CROSSLAND MORTGAGE CORP						USE TAX
MAILING ADDRESS OF FIRST LEGAL OWNER 600-108th AVE N.E. SUITE 314 CITY STATE ZIP CODE BELLEVUE WA 98004						SUB-AGENT FEES
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR DATE ELIMINATION OF TITLE: X Christine D. Houston 4-11-94						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 46.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Registered Owner Signature(s): X Christine D. Houston

(Title)

## DEALER'S REPORT OF SALE

I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

DEALER NAME

DATE OF SALE

WA DLR NO.

DEALER'S AUTHORIZED SIGNATURE

X

NOTARY OR LICENSE AGENT &amp; NUMBER

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 1994.

Residing in \_\_\_\_\_ County

☐ USE TAX EXEMPT Sale to Indian on the Reservation (attach notarized statement of delivery)

## COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)

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/FS OPERATOR NUMBER	DATE
UNSTAL R. FERREIS	X Unstall R. Ferreis	29-01-10	6-21-94

## RECORDING OFFICE

This form has been recorded in the county records.

RECORDING NUMBER	COUNTY	VOLUME/PAGE	DATE
9406210104	Skagit		6-21-94

Order No. 42520  
Exhibit A

EXHIBIT "A"

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

Lot 23, "IDLEWOOD, SKAGIT COUNTY, WASHINGTON" , as per plat  
recorded in Volume 8 of Plats at Page 25, in the records of  
Skagit County, State of Washington.