



MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK: JERRY MCINTURFF, SKAGIT COUNTY AUDITOR. FILED AT THE REQUEST OF: NAME, ADDRESS. 94 DEC -8 A9:33

Please check one T-75339-E Land title 6/8

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

9412080015

1 MANUFACTURED HOME REQUEST OF: TPO/PLATE NUMBER, YEAR, MAKE, WIDTH LENGTH, VEHICLE IDENTIFICATION NUMBER (VIN)

2 LAND Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office or it may be typed or printed on an Additional Attachment Form (TD-420-732). Manufactured home will be AFFIXED REMOVED. PROPERTY TAX PARCEL NUMBER: 340401-0-069-0029

3 TITLE COMPANY CERTIFICATION I certify that the legal description of the land and ownership is true and correct per the real property records. NAME, TITLE COMPANY/PHONE NUMBER, SIGNATURE, DATE

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

4 BUILDING PERMIT OFFICE CERTIFICATION I certify that the manufactured home has been affixed to the real property as described, or a building permit has been issued for this purpose and the attachment will be inspected upon completion. BLDG PERMIT #, NAME, SIGNATURE/TITLE, BLDG PERMIT OFFICE/PHONE #, DATE

5 OWNER INFORMATION Provide the Washington Driver's License or I.D. card number (PIC) for each owner: COUNTY, INC, UNINC, REGISTERED OWNERS, LEGAL OWNERS. REGISTERED: NAME OF FIRST OWNER, ADDRESS OF OWNER, CITY, STATE, ZIP CODE. LIENHOLDER: NAME OF FIRST LEGAL OWNER, MAILING ADDRESS OF FIRST LEGAL OWNER, CITY, STATE, ZIP CODE. FEES: FILING FEE, APPLICATION, MOBILE HOME FEES, ELIMINATION, USE TAX, SUB-AGENT FEES, TOTAL FEES & TAX. DEALER'S REPORT OF SALE: certify that this information is correct. The vehicle is clear of encumbrances except as shown.

NOTARY OR LICENSING AGENT & NUMBER: Nancy Lea Cleave. SUBSCRIBED TO AND SWORN BEFORE ME THIS 7th DAY OF December 19 94. Residing in (County) Skagit. USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)

6 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/VES OPERATOR NUMBER, DATE



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 340401-0-069-0029

Legal Description:

Lot 4 of Short Plat No. 90-66, approved July 21, 1992 and recorded July 21, 1992 under Auditor's File No. 9207210068, being a portion of Government Lot 12, Section 1, Township 34 North, Range 4 East, W.M..

Situate in the County of Skagit, State of Washington.

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

DATE

RECORDING NUMBER