



# MANUFACTURED HOME APPLICATION

RECORDED'S CLOCK  
STAGIT COUNTY AUDITOR

FILED AT THE REQUEST OF:  
NAME

'95 MAR 31 P1:36

ADDRESS

REQUEST OF

Please check one

- ☒ 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)

1	MANUFACTURED HOME	9503310073		
TPO/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
710287	84	Candlewood	60X28	10287

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	
<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED	
PROPERTY TAX PARCEL NUMBER 4384-000-056-0019	

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
		X	
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.			
NAME	SIGNATURE/TITLE	BLDG PERMIT #	DATE
MINDY NOVOTNY	X Mindy Novotny PERMIT TECH.	11587	3-29-95
BLDG PERMIT OFFICE/PHONE #			
(360) 336-6214			

5	OWNER INFORMATION				
COUNTY	INC UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FEES
	<input checked="" type="checkbox"/> <input type="checkbox"/>	2	1		
NAME OF FIRST OWNER					APPLICATION
Todd G Nelson					
NAME OF SECOND OWNER					MOBILE HOME FEES
Anastasia M Nelson					
ADDRESS OF OWNER					ELIMINATION
1272 Bayhill Dr.					
CITY	STATE	ZIP CODE	-OR- if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document.		USE TAX
Burlington	WA	98233			
NAME OF FIRST LEGAL OWNER					SUB-AGENT FEES
Clark A Moore					
MAILING ADDRESS OF FIRST LEGAL OWNER					TOTAL FEES & TAX
1999 Swan Rd.					\$
CITY	STATE	ZIP CODE	More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.		
mt. Vernon	WA	98273			
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY: X Clark Moore					DEALER'S REPORT OF SALE
					I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

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: Owner Signature(s) & Title(s):			WA DLR NO	DATE OF SALE	PURCHASE PRICE
X	Jordan Nelson				\$
X	Anastasia M Nelson		DEALER NAME	TAX JURISDICTION/TAX RATE	
X	Clark A Moore		DEALER'S AUTHORIZED SIGNATURE		
			<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)		

NOTARY OR LICENSING AGENT SIGNATURE	SUBSCRIBED TO AND SWORN BEFORE ME THIS	Residing in (County)
X [Signature]	DAY OF March 19 95	Whatcom County, Burlington, WA
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/VFS OPERATOR NUMBER	DATE
CRYSTAL R. FERRIS	X Crystal R. Ferris	29-01-10	3-31-95



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT  
**LEGAL DESCRIPTION OF LAND**

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application 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 4384 - 000 - 056 - 0019

Legal Description:

Eastwind LT56 INC M/H 17960 Candlewood 84 60x28

9503310073