



## MANUFACTURED HOME APPLICATION

## 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)

9506280001

RECORDER'S CLOCK

'95 JUN 28 A8:39

RECORDED BY \_\_\_\_\_

REQUEST OF \_\_\_\_\_

1 MANUFACTURED HOME					
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)	COLOR #1 TOP OR FRONT:	COLOR #2 BOTTOM OR REAR COLOR:
1995	WOLSEN WEST	52' x 27'	WH 13752		

2 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 336032-2-003-0900	

3 TITLE COMPANY CERTIFICATION			
I certify that the legal description of the land and ownership are true and correct.			
NAME	TITLE COMPANY/PHONE NUMBER	SIGNATURE X	DATE
NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative.			

4 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.			
NAME TISH CAMPBELL	SIGNATURE/TITLE X Tish Campbell, Permit	BLDG PERMIT OFFICE/PHONE NUMBER 360/336-9410	DATE 6/16/95

5 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
			1	1		
NAME OF FIRST REGISTERED OWNER KEVIN D EVANS						APPLICATION
NAME OF SECOND REGISTERED OWNER 2363 EAST SAGE ROAD						
ADDRESS OF FIRST REGISTERED OWNER DARRINGTON WA 98291						
CITY STATE ZIPCODE						MOBILE HOME FEES
NAME OF FIRST LEGAL OWNER* COUNTRYWIDE/AMERICA'S WHOLESALE						ELIMINATION
MAILING ADDRESS OF FIRST LEGAL OWNER 410 CARILLON POINT						USE TAX
CITY STATE ZIPCODE KIRKLAND WA 98033						SUB-AGENT FEES
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: X						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 Kevin D. Evans

X

X

## DEALER'S REPORT OF SALE

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

DEALER NAME

WA DLR NO.

DEALER'S AUTHORIZED SIGNATURE

X

PURCHASE PRICE

\$

TAX JURISDICTION/TAX RATE

DATE OF SALE

NOTARY OR LICENSING AGENT'S NUMBER

X 1250

Subscribed and Sworn to Before Me This

5 Day of May 1995

Residing in

Sumner

County

☐ USE TAX EXEMPT Sale to Indian 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 Tereza Medved	SIGNATURE X Tereza Medved	OFFICE/VEHICLE OPERATOR NUMBER 2901-11	DATE 6-28-95

7 RECORDING OFFICE			
This form has been recorded in the county records.			
RECORDING NUMBER 9506280001	COUNTY BK 145	VOLUME/PAGE PG 0464	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 x 331032-2-003-0400

Legal Description:

Order No. 45224

**SCHEDULE "C"**

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

Tract "B" of revised Skagit County Short Plat No. 103-79, approved May 7, 1980, and recorded July 7, 1980, in Volume 4 of Short Plats, Page 133, under Auditor's File No. 8007070047, being a portion of the South 1/2 of the North 1/2 of the Southwest 1/4 of the Northwest 1/4 of Section 32, Township 33 North, Range 10 East, W.M.

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
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