716924

STATE OF WASHINGTON Department of **Licensing**

MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK	FILED AT THE REQUEST OF:
9508280008 '95 AUG 28 A9:17	NAME ADDRESS

Please check one

- [XX] **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

TPO/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	95	Wynnewood	28/48	11821301A&B

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 [X] AFFIXED [ ] REMOVED

PROPERTY TAX PARCEL NUMBER: 4194-000-004-0004/

P77925

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.

BLDG PERMIT # 95-1020

NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE PHONE #	DATE
Marilee Kirk	X Permit Tech	Skagit Co. 336-9410	8/8/95

5 OWNER INFORMATION

COUNTY #	MC	UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:
	[ ]	[ ]	2	1	

REGISTERED

NAME OF FIRST OWNER: John A. Hinchman

NAME OF SECOND OWNER: Pauline R. Hinchman — HINCHPR674RA

ADDRESS OF OWNER: 808 Evans Dr.

CITY	STATE	ZIP CODE
Sedro Woolley	WA	98284

LIENHOLDER

NAME OF FIRST LEGAL OWNER*: US Home Loans

MAILING ADDRESS OF FIRST LEGAL OWNER: 2221 Riverside Dr.

CITY	STATE	ZIP CODE
Mount Vernon	WA	98273

*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY. X Margaret Aden Sr. AVP

--OR-- If the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document: 371010092

More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.

FEES	
FILING FEE	
APPLICATION	
MOBILE HOME FEES	
ELIMINATION	
USE TAX	
SUB-AGENT FEES	
TOTAL FEES & TAX	$

DEALER'S REPORT OF SALE

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

WA DLR NO	DATE OF SALE	PURCHASE PRICE
4197	8-21-95	$48,350.00

DEALER NAME	TAX JURISDICTION/TAX RATE
Skagit Homes Inc	7.8% 2902

DEALER'S AUTHORIZED SIGNATURE: X

[ ] **USE TAX EXEMPT** Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)

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):**

X Pauline Hinchman

X John A. Hinchman P.O.A.

X By Pauline Hinchman

NOTARY OR LICENSE AGENT & NUMBER	SUBSCRIBED TO AND SWORN BEFORE ME THIS	Residing in (County)
X SEE ATTACHED	10th DAY OF August 19 95	Skagit

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

Candace M. Taylor Exp. 1/1/97

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
DEPT. OF LICENSING	X 9508280003	901-01	8-28-95

BK 1470 PG 0026

STATE OF WASHINGTON
Department of
LICENSING

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: [X] Title Elimination
[ ] Removal From Real Property
[ ] Transfer In Location

Land: Property Tax Parcel Number 4194-000-004-0004/P77925

Legal Description:

Lot 4, "PLAT OF FRUITDALE VIEW DIV. NO. 1", as per plat recorded in Volume 10 of Plats, page 29, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.

STATE OF WASHINGTON, }
County of SKAGIT } ss.

On this 10th day of August, 19 95, before me personally appeared Pauline Hinchman to me known to be the individual described in and who executed the foregoing instrument for her self and also as Attorney in fact for John A. Hinchman and acknowledged that she signed and sealed the same as her free and voluntary act and deed for her self and also as the free and voluntary act and deed as Attorney in Fact for said principal for the uses and purposes therein mentioned, and on oath stated that the Power of Attorney authorizing the execution of this instrument has not been revoked and that the said principal is now living and is not insane.

Given under my hand and official seal the day and year last above written.

Candace M. Taylor
Notary Public in and for the State of Washington,
residing at Mount Vernon
My commission expires 1/1/97 Candace M. Taylor

ACKNOWLEDGEMENT,
INDIVIDUAL AND AS ATTORNEY IN FACT.

Form No. W. 13.1

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

9508280003

BK 147 PG 0027