



FIRST AMERICAN TITLE CO.

MANUFACTURED HOME APPLICATION

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)

9511090062

RECORDER'S CLOCK

SKAGIT

KATHY HILL
FILED AT THE REQUEST OF:
NAME

95 NOV 9 5 51

RECORDED _____ FILLED _____
REQUEST OF

1 MANUFACTURED HOME

TPO/PLATE NUMBER	YEAR 1995	MAKE LIBERTY	WIDTH/LENGTH 28/60	VEHICLE IDENTIFICATION NUMBER (VIN) 09L30225XU
------------------	--------------	-----------------	-----------------------	---

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
4632-000-015-0004

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 X	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 #
95-1094

NAME Jody Ann Goodman	SIGNATURE/TITLE X Jody Ann Goodman	BLDG PERMIT OFFICE/PHONE # 336-9410	DATE 10-11-95
--------------------------	---------------------------------------	--	------------------

5 OWNER INFORMATION

SKAGIT COUNTY PERMIT CENTER

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

FEES

FILING FEE

APPLICATION

MOBILE HOME FEES

ELIMINATION

USE TAX

SUB-AGENT FEES

TOTAL FEES & TAX

\$

NAME OF FIRST OWNER
BLAKESLEE, PAUL D.

NAME OF SECOND OWNER
BLAKESLEE, DEBORAH K.

ADDRESS OF OWNER
2222 FEATHER LANE

CITY SEDRO-WOOLLEY	STATE WA	ZIP CODE 98284
-----------------------	-------------	-------------------

NAME OF FIRST LEGAL OWNER
LYNWOOD MORTGAGE CORPORATION, its successors and/or assigns

MAILING ADDRESS OF FIRST LEGAL OWNER
P.O. BOX 5857

CITY LYNNWOOD	STATE WA	ZIP CODE 98046
------------------	-------------	-------------------

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY X Patti Ainslie

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

UBI # 600 453 730

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

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):

X Deborah K. Blakeslee

X Paul D. Blakeslee

X Patti Ainslie

NOTARY OR LICENSING AGENT & NUMBER

X [Signature]

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 J. Medved	SIGNATURE X J. Medved	OFFICE/VFS OPERATOR NUMBER 2901-11	DATE 11-9-95
-------------------	--------------------------	---------------------------------------	-----------------

9511090062

BR1492FG0649



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 4632-000-015-0004

Legal Description:

LOT 15, "EAGLE VALLEY P.U.D.", AS PER PLAT RECORDED IN VOLUME 15 OF PLATS, PAGES 181 TO 183, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON.

