

WASHINGTON MUTUAL BANK
1336 CORNWALL AVENUE
BELLINGHAM, WA 98225

ISLAND TITLE COMPANY
SB-8183 ✓

9512130091



MANUFACTURED HOME APPLICATION

| | |
|---|---|
| RECORDER'S CLOCK KATHY HILL 95 DEC 13 P3:39 | FILED AT THE REQUEST OF: NAME ADDRESS |
|---|---|

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 | | | | RECORDED | FILED |
| TPO/PLATE NUMBER +99358 | YEAR 1987 | MAKE Oakman | WIDTH/LENGTH 58 x .28 | REQUEST OF | VEHICLE IDENTIFICATION NUMBER (VIN) 06910408W |

| | |
|---------------|---|
| 2 LAND | PROPERTY TAX PARCEL NUMBER 350715-2-004-0106 |
|---------------|---|

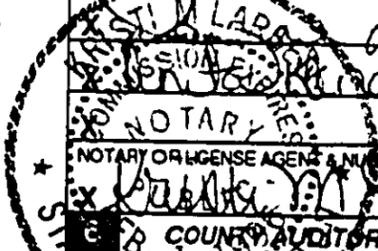
Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office or it may be typed or printed on an Additional Attachment Form (TD-420-732).
Manufactured home will be AFFIXED REMOVED

| | | | |
|--|----------------------------|----------------|------|
| 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 # 17804 |
| NAME Johanne Ostlund | SIGNATURE/TITLE Johanne Ostlund | BLDG PERMIT OFFICE/PHONE # 360 336-9410 | DATE 9-21-95 |

| | | | | | |
|---|--------------------------|---------------------|---|---|---------------------------|
| 5 OWNER INFORMATION | | | | FEES | |
| COUNTY # INC UNINC Skagit <input checked="" type="checkbox"/> <input type="checkbox"/> | # REGISTERED OWNERS 2 | # LEGAL OWNERS 1 | Provide the Washington Driver's License or I.D. card number (PIC) for each owner: | FILING FEE | APPLICATION |
| NAME OF FIRST OWNER DONALD W ANDERSON | | | Anderson 362 DG | MOBILE HOME FEES | ELIMINATION |
| NAME OF SECOND OWNER ANITA K ANDERSON | | | Anderson 364 CZ | USE TAX | SUB-AGENT FEES |
| ADDRESS OF OWNER 846 Iron Mountain View Lane | | | ..OR.. if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document. | TOTAL FEES & TAX \$ 44 25 | |
| CITY Concrete | STATE WA | ZIP CODE 98237 | More than two owners or one lienholder? Please use attachment form(s) #TD-420-732. | | |
| NAME OF FIRST LEGAL OWNER* WASHINGTON MUTUAL BANK (01-089-575711-7) | | | DEALER'S REPORT OF SALE | | |
| MAILING ADDRESS OF FIRST LEGAL OWNER 1336 Cornwall | | | I certify that this information is correct. The vehicle is clear of encumbrances except as shown. | | |
| CITY Bellingham | STATE WA | ZIP CODE 98225 | DATE OF SALE | PURCHASE PRICE | TAX JURISDICTION/TAX RATE |
| *SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY: <input checked="" type="checkbox"/> Kristi M. Larsen | | | DEALER NAME | DEALER'S AUTHORIZED SIGNATURE | |

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 AM THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE: Owner Signature(s) & Title(s)



| | | |
|---|------------------------------------|---------------------------------------|
| NOTARY OR LICENSE AGENT'S NUMBER Kristi M. Larsen | DATE OF SALE Nov 9 1995 | PURCHASE PRICE \$ 55000 |
| COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents) | DEALER'S AUTHORIZED SIGNATURE X | TAX JURISDICTION/TAX RATE |
| 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 T. Medved | SIGNATURE T. Medved | OFFICE/VFS OPERATOR NUMBER 2901-11 |
| | | DATE 12-13-95 |



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 350715-2-004-0106

Legal Description:

Tract C, Skagit County Short Plat no. 91-103, approved December 3, 1992, and recorded December 22, 1992, in Volume 10 of Short plats, page 163, under Auditor's File No. 9212220133, records of Skagit County, Washington; being a portion of Parcel A of Skagit County Short Plat no. 102-78 and a portion of Lot 4 of Skagit County Short Plat No. 6-85, all in Section 15, Township 35 North, Range 7 East of the Willamette Meridian.

Situated in Skagit County, Washington.

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