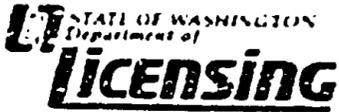


UNOFFICIAL COPY



MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK SKA	FILED AT THE REQUEST OF: NAME
96 JAN 19 A9:33	ADDRESS
SOURCE	REQUEST OF

Please check one

TITLE ELIMINATION (Complete all but section 3, below) 76115

TRANSFER IN LOCATION (Complete ALL sections below)

REMOVAL FROM REAL PROPERTY (Complete all but section 4, below)

1 MANUFACTURED HOME		3601190021		VEHICLE IDENTIFICATION NUMBER (VIN)	
TPO PLATE NUMBER	YEAR	MAKE	WIDTH LENGTH	X828000X 09L29596XUT	
	1995	GLEN OAKS	66 X 39		

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: 35050920040007

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 OFFICE PHONE #	DATE
	X		

5 OWNER INFORMATION

COUNTY #	REG. NO.	UNREG. NO.	REGISTERED OWNERS	LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FEES
						FILING FEE
REGISTERED	NAME OF FIRST OWNER				OR if the owner is a business, provide the United Business Identifier (UBI) found on the business Registration & Licenses Document	APPLICATION
	JO MARIE COPE					MOBILE HOME FEES
LICENSED	NAME OF SECOND OWNER				More than two owners or one lienholder? Please use attachment form(s) #TD 420 732	ELIMINATION
	JOHN R. COPE					USE TAX
	ADDRESS OF OWNER					SUB AGENT FEES
2400 HELMICK RD.					TOTAL FEES & TAX	
CITY					\$	
SEDRO WOOLLEY						
STATE						
WA						
ZIP CODE						
98225						
NAME OF FIRST LEGAL OWNER						
WASHINGTON MUTUAL BANK						
MAILING ADDRESS OF FIRST LEGAL OWNER						
13336 CORNWALL						
CITY						
BELLINGHAM						
STATE						
WA						
ZIP CODE						
98225						
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE REMOVAL FROM REAL PROPERTY						
X [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 WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THE INFORMATION IS ACCURATE. Owner Signature(s) & Title(s):

WARRANTY	DATE OF SALE	PURCHASE PRICE
4117	5/12/95	\$67785.00
DEALER NAME	TAX JURISDICTION/TAX RATE	
Wally Home Center	078	
DEALER'S SIGNATURE		
[Signature]		
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)		

NOTARY OR LICENSE AGENT & NUMBER: x [Signature]

SUBSCRIBED TO AND SWORN BEFORE ME THIS 26 DAY OF April 1995

Residing in (County): Burlington - Skagit

6 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents) Commission expires 6-16-97

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'S OPERATOR NUMBER	DATE
T. Medved	X [Signature]	8901-11	1-18-96

062012191X
BX 151216U290



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 35050920040007

Legal Description:

LOT 1 OF SHORT PLAT NO. 31-89, APPROVED JUNE 30, 1989 AND RECORDED JULY 10, 1989, UNDER AUDITOR'S FILE NO. 8907100023 IN VOLUME 8 OF SHORT PLATS, PAGE 142, BEING A PORTION OF THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 AND THE NORTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 9, TOWNSHIP 35 NORTH, RANGE 5 EAST, W.M.; SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

John R. Cope
J Marie Cope