



MANUFACTURED HOME APPLICATION

Please check one ISLAND TITLE COMPANY SB-9142/

- ☒ 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)

RECORDER'S CLOCK

FILED AT THE REQUEST OF:

NAME

ADDRESS

KATHY HILL
SKAGIT

96 AUG 12 AM 53

1 - MANUFACTURED HOME

TPO/PLATE NUMBER	YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)
	1996	SKYLINE	28/40	2T91F4076-I AB

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

350312-0-003-0007

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 #

96-0604

NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE #	DATE
Brandon Black	Brandon Black Permit Tech	Permit 336-9410	8-8-96

5 - OWNER INFORMATION

COUNTY # INC UNINC	# REGISTERED OWNERS	# LEGAL OWNERS	Provide the Washington Driver's License or I.D. card number (PIC) for each owner:	FEES
SKAGIT <input type="checkbox"/> <input type="checkbox"/>				FILING FEE
NAME OF FIRST OWNER				APPLICATION
PLOEG, RODNEY L				MOBILE HOME FEES
NAME OF SECOND OWNER				ELIMINATION
ADDRESS OF OWNER				USE TAX
1558 SAMISH HEIGHTS ROAD				SUB-AGENT FEES
CITY	STATE	ZIP CODE	OR... if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document	TOTAL FEES & TAX
BOW	WA	98232	303135008	\$
NAME OF FIRST LEGAL OWNER*				DEALER'S REPORT OF SALE
INTERWEST SAVINGS BANK				I certify that this information is correct. The vehicle is clear of encumbrances.
MAILING ADDRESS OF FIRST LEGAL OWNER				
P.O. BOX 1649				
CITY	STATE	ZIP CODE		
OAK HARBOR	WA	98277		
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE REMOVAL FROM REAL PROPERTY				
X [Signature] / Mr. Specialist				

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 [Signature]

X [Signature] MY COMMISSION EXPIRES: 9/15/98

NOTARY OR LICENSE AGENT & NUMBER
X ROBERTA N. HOODIMAN

SUBSCRIBED TO AND SWORN BEFORE ME THIS

DAY OF August 1996

Residing in (County)

SKAGIT

BURLINGTON

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

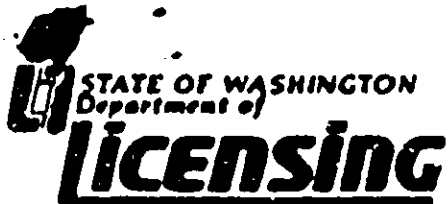
I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.

NAME	SIGNATURE	OFFICE/VFS OPERATOR NUMBER	DATE
DEPT. OF LICENSING	[Signature]	29-01-04	8/12/96

9608120112

0814 1996

0645 0048



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 350312-0-003-0007
1558 SAMISH HEIGHTS RD., BOW, WA 98232

Legal Description:

THE NORTHWEST QUARTER OF THE NORTHEAST QUARTER OF SECTION 12, TOWNSHIP 35
NORTH, RANGE 3 EAST, OF THE WILLAMETTE MERIDIAN;

EXCEPT THE SOUTH 20 ACRES THEREOF;

AND ALSO EXCEPT THE EAST 30 FEET THEREOF CONVEYED TO SKAGIT COUNTY FOR
ROAD PURPOSES BY DEED RECORDED FEBRUARY 15, 1916 UNDER AUDITOR'S FILE
NO. 111850, RECORDS OF SKAGIT COUNTY, WASHINGTON;
SITUATE IN SKAGIT COUNTY, WASHINGTON.