



MANUFACTURED HOME APPLICATION

T-79901-E

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)

RECORDED'S CLOCK KATHY HILL SKAGIT 96 SEP -5 P3:42	FILED AT THE REQUEST OF: NAME Land Title Company ADDRESS P.O. Box 1225 Mount Vernon, WA 98273
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1 MANUFACTURED HOME 9609050096			
TPO/PLATE NUMBER #: 6032621	YEAR 92	MAKE Goldw	WIDTH/LENGTH 48X25
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 <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			
PROPERTY TAX PARCEL NUMBER 4632-000-002-0001/P106893			

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.			
NAME BILL DOWE	SIGNATURE/TITLE X Bill Dowe Customer Services	BLDG PERMIT OFFICE/PHONE # 336-9410	DATE 9/6/96

5 OWNER INFORMATION			
COUNTY # INC UNINC <input 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: Hogan D*37 9/K4
FEES			
FILING FEE			
APPLICATION			
MOBILE HOME FEES			
ELIMINATION			
USE TAX			
SUB-AGENT FEES			
TOTAL FEES & TAX \$			

REGISTERED	NAME OF FIRST OWNER Hogan, Declan, Jr.			OR-- if the owner is a business, provide the Unified Business Identifier (UBI), found on the business Registration & Licenses Document. 371010092	TOTAL FEES & TAX \$
	NAME OF SECOND OWNER Hogan, Tina L.				
	ADDRESS OF OWNER 2202 Feather Lane				
LIENHOLDER	CITY Sedro-Woolley	STATE WA	ZIP CODE 98284	More than two owners or one lienholder? Please use attachment form(s) #TD-420-732.	DEALER'S REPORT OF SALE
	NAME OF FIRST LEGAL OWNER U.S. Bancorp Home Loans				
	MAILING ADDRESS OF FIRST LEGAL OWNER 2221 Riverside Drive				
CITY Mount Vernon			STATE WA	ZIP CODE 98273	I certify that this information is correct. The vehicle is clear of encumbrances except as shown.
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY X Cheryl Dowe					

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] X [Signature]			WA DLR NO	DATE OF SALE	PURCHASE PRICE \$
			DEALER NAME	TAX JURISDICTION/TAX RATE	
			DEALER'S AUTHORIZED SIGNATURE X		
			<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 30th DAY OF August 1996		

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 T. Medved	SIGNATURE X [Signature]	OFFICE/PHONE NUMBER 3901-11	DATE 9-5-96

9609050096

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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: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

Land: Property Tax Parcel Number 4632-000-002-0001/p106893

Legal Description:

Lot 2, "EAGLE VALLEY P.U.D.", as per plat recorded in Volume 15 of
Plats, pages 181 through 183, inclusive, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.

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
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