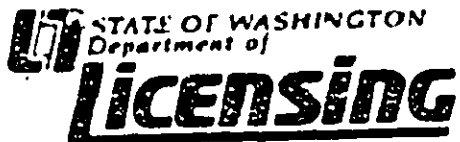


Property Address: 200 Widnor Drive, Mt. Vernon, WA 98273

9610010095



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)

RECORDER'S CLOCK

FILED AT THE REQUEST OF:

NAME

ADDRESS

KATHY HILL

96 OCT -1 P4:03

1 MANUFACTURED HOME

TPO/PLATE NUMBER

YEAR

MAKE

WIDTH/LENGTH

RECORDED

VEHICLE IDENTIFICATION NUMBER (VIN)

1973

CHAMPION

1420

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

3771-000-006-0005

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 #

1007

NAME SIGNATURE/TITLE BLDG PERMIT OFFICE/PHONE # DATE

Tammi Anderson

X Tammi Anderson Secretary

(360) 336-6214

2/7/96

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:

FILING FEE

APPLICATION

MOBILE HOME FEES

ELIMINATION

USE TAX

SUB-AGENT FEES

TOTAL FEES & TAX

\$

NAME OF FIRST OWNER
Lois V. Sadowski

NAME OF SECOND OWNER

ADDRESS OF OWNER
200 Widnor Drive

CITY STATE ZIP CODE
Mt. Vernon WA 98273

NAME OF FIRST LEGAL OWNER*
First Nationwide Mortgage Corporation

MAILING ADDRESS OF FIRST LEGAL OWNER
11911 N.E. 1st Street, Suite B103

CITY STATE ZIP CODE
Bellevue WA 98005

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

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

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.

WA DLR NO

DATE OF SALE

DEALER NAME

DEALER'S AUTHORIZED SIGNATURE

X

☐ USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)

NOTARY OR LICENSE AGENT & NUMBER

SUBSCRIBED TO AND SWORN BEFORE ME THIS

Residing in (County)

5th DAY OF February 1996

Whatcom

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

X

2401-02

10-1-96



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 3771-000-006-0005

Legal Description:

Lot 6, "Widnor Drive", according to the plat thereof, recorded in Volume 9 of Plats, page 104, records of Skagit County, Washington.

FIRST AMERICAN TITLE CO.

5610010093

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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