



MANUFACTURED HOME APPLICATION

9610020085

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

KATHY HILL

SKAGIT

96 OCT -2 P3:35

FILED AT THE REQUEST OF:

NAME ISLAND TITLE COMPANY

ADDRESS

P.O. Box 1228
Anacortes, WA 98221

1 MANUFACTURED HOME

TYPE/PLATE NUMBER YEAR MAKE WIDTH/LENGTH RECORDED FILE VEHICLE IDENTIFICATION NUMBER (VIN)
79 EMBSY 36x24 8811

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

3822-000-007-0003

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 #

NAME SIGNATURE/TITLE BLDG PERMIT OFFICE/PHONE # DATE
Robert Osborn X Robert Osborn, Bldg. Insp. 393-1901 9-30-96

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

NAME OF FIRST OWNER ALICE M. WILDE WOLDEAM821DP APPLICATION

NAME OF SECOND OWNER MOBILE HOME FEES

ADDRESS OF OWNER 2205 Dublin Pl CITY STATE ZIP CODE WA 98221

CITY STATE ZIP CODE WA 98221

NAME OF FIRST LEGAL OWNER SAME

MAILING ADDRESS OF FIRST LEGAL OWNER

CITY STATE ZIP CODE

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY X Alice M. Wilde

Any person 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 9A.02.010). 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):

WA DLR NO DATE OF SALE PURCHASE PRICE \$

DEALER NAME TAX JURISDICTION/TAX RATE

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 DAY OF Sept 96 Residing in (County) Skagit

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 DEPT. OF LICENSING OFFICE/VFS OPERATOR NUMBER DATE
X 2901-02 10-2-96

9610020085

EX 1591 PGU208



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 P59394

Legal Description:

**Lot 7, SKYLINE NO. 6, according to the plat thereof
recorded in Volume 9 of Plats, page 64, records of
Skagit County, 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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