



9610040024

MANUFACTURED HOME APPLICATION

RECORDER'S CLOCK
KATHY HILL
SKAGIT
96 OCT -4 A10:31
RECORDED AT REQUEST OF:

TITLE OPTIONS

☐ Original
☐ Transfer
☐ Duplicate
☐ Release

☒ 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)

1 MANUFACTURED HOME				
YEAR	MAKE	WIDTH/LENGTH	VEHICLE IDENTIFICATION NUMBER (VIN)	COLOR #1 TOP OR FRONT: REQUEST
87	SKYLINE	56X28	06910585W	COLOR #2 BOTTOM OR REAR COLOR:

2 LAND	
• Attach a copy of the legal description of your land. It can be obtained from your County Assessor's office.	
• Land to which the manufactured home is being:	<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED
PROPERTY TAX PARCEL NUMBER 3909-013-010-0005	

3 TITLE COMPANY CERTIFICATION			
I certify that the legal description of the land and ownership are true and correct.			
NAME	TITLE COMPANY/PHONE NUMBER	SIGNATURE	DATE
		X	
NOTE: Application must be finalized with a Licensing Agent within 10 calendar days of the date signed by the Title Company Representative.			

4 BUILDING PERMIT OFFICE CERTIFICATION			
I certify that the manufactured home has been affixed to the real property as described, or the following building permit has been issued for this purpose and will be inspected upon completion.			
NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE NUMBER	DATE
JOANNE OSTLUND	X Joanne Ostlund P.T.	336-9410	1-10-96

5 OWNER INFORMATION				FEES	
COUNTY #	INC	UNINC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	FILED FEE
					APPLICATION
NAME OF FIRST REGISTERED OWNER					MOBILE HOME FEES
ROBERT L. VANDER LINDEN					ELIMINATION
NAME OF SECOND REGISTERED OWNER					USE TAX
DELAINE M. THOMPSON					SUB-AGENT FEES
ADDRESS OF FIRST REGISTERED OWNER					TOTAL FEES & TAX
792 CEDAR STREET					\$
CITY	STATE	ZIPCODE	This "NUMBER" may be found on your Washington Drivers License/ I.D. Card --OR-- If the owner is a business, provide the Unified business identifier (UBI) number.		PURCHASE PRICE
SEDRO-WOOLLEY	WA	98284	More than two registered or one legal owner? . . . Please attach additional forms		TAX JURISDICTION/TAX RATE
NAME OF FIRST LEGAL OWNER					DATE OF SALE
WASHINGTON MUTUAL					
MAILING ADDRESS OF FIRST LEGAL OWNER					
188 106TH AVE NE #510					
CITY	STATE	ZIPCODE			
BELLEVUE	WA	98004			
*SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE: X Charles Sornade 11-14-95					
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 \$15,000 and/or 10 years imprisonment (RCW 48.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Registered Owner Signature(s): X Robert L. Vander Linden Title					
X Delaine M. Thompson					
X 1					
NOTARY ON LICENSE AGENT & NUMBER					
X Karen Graves 9th Day of November 95					
Subscribed and Sworn to Before Me This					
Recording in Skagit County					
DEALER'S REPORT					
I certify that this information is correct. No vehicle title or encumbrance except as shown.					
DEALER NAME					
WA DLR NO.					
DEALER'S AUTHORIZED SIGNATURE					
X					
USE TAX EXEMPT Sale to Indian on the Reservation (attach notarized statement of delivery)					

6 KAREN GRAVES 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	2901-02	10-08-96

7 RECORDING OFFICE			
This form has been recorded in the county records.			
RECORDING NUMBER	COUNTY	VOLUME/PAGE	DATE
9610040024			



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 3869-013-010-0005 P63412

Legal Description:

LOT 10, BLOCK "M", "PLAT OF CAPE HORN ON THE SKAGIT DIVISION NO. 2", as per plat recorded in Volume 9 of Plats, Pages 14 through 19, inclusive, records of Skagit County.

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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 8/25/01 RECORDING NUMBER