



FIRST AMERICAN TITLE CO. 49001  
 MANUFACTURED HOME APPLICATION  
**9610080115**

RECORDER'S CLOCK  
 KATHY HILL  
 SKAGIT  
 '96 OCT -8 P3:43  
 RECORDED AT REQUEST OF:

- TITLE OPTIONS
- Original
  - Transfer
  - Duplicate
  - Reissue

- 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 COLOR #2 BOTTOM OR REAR COLOR
1997	PALM HARBOR	53X28			

**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:  AFFIXED  REMOVED

PROPERTY TAX PARCEL NUMBER  
 P41954 350628-2-003-0400  
 P41947 350628-2-002-0104

**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.

BLDG PERMIT #
96-0560

NAME	SIGNATURE/TITLE	BLDG PERMIT OFFICE/PHONE NUMBER	DATE
Sheryl Walker	Plans Exam.	336-9410	10/8/96

**5 OWNER INFORMATION**

COUNTY #	INC	UNINC	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS	Please provide the Department of Licensing (DOL) Client "NUMBER" for each owner:	*FEES
						FILING FEE APPLICATION MOBILE HOME FEES ELIMINATION USE TAX SUB-AGENT FEES TOTAL FEES & TAX \$

NAME OF FIRST REGISTERED OWNER: Dick, Jr., Arthur F. D I C K I \* A F I 3 9 6 R I D

ADDRESS OF FIRST REGISTERED OWNER: 1031 Warfield Road, Sedro-Woolley, WA 98284

NAME OF FIRST LEGAL OWNER: Washington Mutual Bank

MAILING ADDRESS OF FIRST LEGAL OWNER: 1336 Cornwall Ave. m/s: CRNO1ML, Bellingham, WA 98225

\*SIGNATURE OF LEGAL OWNER INDICATES COMMENT FOR ELIMINATION OF TITLE: X

More than two registered or one legal owner? . . . Please use attachment forms (TD-420-732)

Anyone who knowingly makes a false statement or is guilty of a felony, and upon conviction may be punished by a fine of \$5,000 and/or 10 years imprisonment (RCW 46.12).

UNDER PENALTY OF PERJURY I, THE SIGNER OF THIS APPLICATION, CERTIFY THAT I AM THE REGISTERED OWNER OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE.

REGISTERED OWNER SIGNATURE: *[Signature]*

**DEALER'S REPORT OF SALE**

I certify that this information is correct. The vehicle is clear of encumbrances except as shown.

PURCHASE PRICE: \$57,034.00  
 TAX JURISDICTION/TAX RATE: 7.890  
 DATE OF SALE: 8/96

DEALER NAME: Magic Living Homes  
 WA DLR # 4058 x Robert A. Murray

NOTARY OR LICENSE AGENT & NUMBER: Karen Ashley, 7TH Day of OCT. 19 96, Residing in Skagit County

USE TAX EXEMPT:  (Sale to Indian on the Reservation (attach notarized statement of delivery))

**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/VS OPERATOR NUMBER	DATE
CRYSTAL R. FERRELLS	X	29-01-10	10-8-96

**7 RECORDING OFFICE**

This form has been recorded in the county records.

RECORDING NUMBER	COUNTY	VOLUME/PAGE	DATE
9610080115	SKAGIT		

