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Return Address: LYNNWOOD ESCROW CORPORATION P.O. BOX 5857 LYNNWOOD, WA. 98046	
9701300078	97 JAN 30 P4:14
WASHINGTON STATE COUNTY AUDITOR/RECORD	the state of the second second
Please print or type information	COVER Sheet)
Document Title(s) (or transactions contained therein)	):
1. TITLE ELIMINATION DOCUMENTS 2. 3. 4.	FIRST AMERICAN TITLE CO. 49870
Reference Number(s) of Documents assigned of Auditor's File No.:       Document Title;         Grantor(s) (Last name first, then first name and initials	
1. BANKS, TOM J. 2. HENNING-BANKS, LINDA J. 3. 4.	
5. Additional names on page of document.	
<ul> <li>5Additional names on pageof document.</li> <li>Grantee(s) (Last name first, then first name and initials</li> <li>1. LYNNWOOD MORTGAGE CORPORATION</li> <li>2.</li> <li>3.</li> <li>4.</li> </ul>	
Grantee(s) (Last name first, then first name and initials 1. LYNNWOOD MORTGAGE CORPORATION 2. 3.	
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Grantee(s) (Last name first, then first name and initials 1. LYNNWOOD MORTGAGE CORPORATION 2. 3. 4. 5. Additional names on page of document. Legal Description (abbreviated: i.e. lot, block, plat or s LOT 107, "FIRST ADDITION FO BIG LAKE WATER FRONT COUNTY, WA. X Additional legal is on page OF TITLE ELIM	ection, township, range): T TRACTS, VOL 4, PG 15, SKAGIT of document.
Grantee(s) (Last name first, then first name and initials 1. LYNNWOOD MORTGAGE CORPORATION 2. 3. 4. 5. Additional names on page of document. Legal Description (abbreviated: i.e. lot, block, plat or s LOT 107, "FIRST ADDITION FO BIG LAKE WATER FRONT COUNTY, WA.	ection, township, range): T TRACTS, VOL 4, PG 15, SKAGIT of document.

Additional legal is on page \_\_\_\_ of document.

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The Auditor/Recorder will rely on the information provided on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

## 9701300078

## BK | 624 PG 060 |

Jeron Cat

Instant of Construction       MANUFACTURED HOME APPLICATION       NAME         Instant of block on the construction of the construc								
TRANSFER IN LOCATION (Complete ALL sections below)         Imanufactured home         Troopute Number         1997         Amber Skylline         Ware Skylline         1997         Amber Skylline         1997         1997         1997         1997         1997         1997         100         100         100         100         100         100         100         100         100         100         100         100         100	lease check one	<u>ING</u>	APPLI	CATION	OME	ECORDER'S CLOC	ĸ	
1997       AMBER COVE       28/44       6791-0504-J         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).       PROPERTY TAX PARCEL NUMBER         Assessor's office or it may be typed or printed on an Additional Attachment Form (TD-420-732).       B863-000-107-0100 (P109571)         3       TITLE COMPANY CERTIFICATION       (P109571)         certify that the legal description of the land and ownership is true and correct per the real property records.       Date         Signature       ITTLE COMPANY CERTIFICATION       Date         certify that the legal description of the land and ownership is true and correct per the real property records.       Name         Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative sign       Building         Buildin's PERMIT OFFICE CERTIFICATION       Signature       96 - 1449         certify that the manufactured home has been affixed to the real property as described, or a building       BLIDG PERMIT         Funder       Signature       1332 - 941 0       1430/97         Signature       Signature       Signature       1332 - 941 0       130/97         Signature       Signature       Provide the Washington Driver's License or I.D.       130/97 <t< th=""><th>TRANSFER IN I         REMOVAL FRO         1         MANUFACTURI</th><th>LOCATION ( DM REAL PR</th><th>Complete ALL sections OPERTY (Complete al</th><th>s belows I but section 4 b</th><th>+:low)</th><th></th><th></th><th></th></t<>	TRANSFER IN I         REMOVAL FRO         1         MANUFACTURI	LOCATION ( DM REAL PR	Complete ALL sections OPERTY (Complete al	s belows I but section 4 b	+:low)			
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).       PROPERTY TAX PARCEL NUMBER         Anufactured home will be       [X]: AFFIXED       REMOVED         ITTLE COMPANY CERTIFICATION       (P109571)         Certify that the legal       tescription of the land and ownership is true and correct per the real property records.         Ittle       ITTLE COMPANY CERTIFICATION         Certify that the legal       tescription of the land and ownership is true and correct per the real property records.         Ittle       ITTLE COMPANY PHONE NUMBER       SIGNATURE         Vare       ITTLE COMPANY PHONE NUMBER       SIGNATURE         Vare       Ittle Company Representative sign         BULDIN': PERMIT OFFICE CERTIFICATION       Ittle Company Representative sign         Certify that the manufactured home has been affixed to the real property as described, or a building       BLDG PERMIT of FICE PHONE •         AME       SIGNATURE INFORMATION       SIGNATURE INFORMATION       BLDG PERMIT OFFICE PHONE •         Owner INFORMATION       SIGNATURE INFORMATION       SIGNATURE INFORMATION       Provide the Washington Driver's License or I.D.         AME       • ACONTY • MC (MAN)       • ACONTRA       • ACONTRA       APPLICATION         AME			4		28/44			
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative sign BUILDING PERMIT OFFICE CERTIFICATION         BUILDING PERMIT OFFICE CERTIFICATION         Certify that the manufactured home has been affixed to the real property as described, or a building errinit has been issued for this purpose and the attachment will be inspected upon completion.         BLDG PERMIT office CERTIFICATION         BLDG PERMIT office Phone •         SIGNATURE TITLE	Assessor's office of Anufactured hom TITLE COMPAN Certify that the leg	or it may be ne will be IY CERTIFIC	e typed or printed o [X] AFF ATION tion of the land and	on an Additior FIXED	REMOVE	orrect per the	-420-732) 386 (P1	3-000-107-0100 09571) ords.
BUILDIN'S PERMIT OFFICE CERTIFICATION         Certify that the manufactured home has been affixed to the real property as described, or a building permit has been issued tor this purpose and the attachment will be inspected upon completion.         BLDG PERMIT ofFICE PHONE of this purpose and the attachment will be inspected upon completion.         Me         SIGNATURE TITLE         Mode and the attachment will be inspected upon completion.         Job of this purpose and the attachment will be inspected upon completion.         Me         SIGNATURE TITLE         Mode of this purpose and the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         OF demit office phone of the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         Job of the attachment will be inspected upon completion.         Job of the attachment will be under the attachment will be upone of the attachment will be upone of the attachment. </td <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td>&gt;</td> <td></td>							>	
BLDG PERMIT #         WE       SIGNATURE TITLE         SIGNATURE TITLE       Signature Title         And Foodman       Signature Title         And Foodman       Signature Title         And Foodman       Signature Title         And Foodman       Signature Title         Signature Title       Signature Title         And Foodman       Signature Title         Signature Title       Signature Title         Signature Title       Signature Title         Signature Title       Signature Title         And Foodman       Signature Title         Signature Title       Provide the Washington Driver's License or I.D.         Signature Title       Signature Title         NAME OF Signatownere				ent within 10	calendar da	ys of the date	e Title Company	Representative signs.
OUNDY       INC       Inc <th< td=""><td>certify that the ma erinit has been is ME dy Am Goo</td><td>anutacture sued tor th</td><td>d home has been a his purpose and the SIGNATURE TITLE</td><td></td><td>will be inspe Permi Tech</td><td>Cted upon co E BLDG PEF 33</td><td>mpletion. RMT OFFICE PHONE • (2-9410</td><td>96-1449 DATE 1/30/97</td></th<>	certify that the ma erinit has been is ME dy Am Goo	anutacture sued tor th	d home has been a his purpose and the SIGNATURE TITLE		will be inspe Permi Tech	Cted upon co E BLDG PEF 33	mpletion. RMT OFFICE PHONE • (2-9410	96-1449 DATE 1/30/97
NAME OF FIRST OWNER       APPLICATION         BANKS, TOM J.       NAME OF SECOND OWNER         NAME OF SECOND OWNER       MOBILE HOWE FEES         HENNING-BANKS, LINDA J.       ADDRESS OF OWNER         ADDRESS OF OWNER       OR if the owner is a business provide the United Business         CITY       STATE			UU RED OWNERS • LEGAL		Provide the W	ashington Driv	er's License or I.D.	
ADDRESS OF OWNER 1908 West Big Lake Blvd. City State Color USE TAX	BANKS, TO	1J.			card number	PIC) for each d	owner:	
MOUNT VERNON WA. 98273 During to Bill, Touris Registration & Licenses	ADDRESS OF OWNER 1908 West CITY MOUNT VERN NAME OF F.RST LECT	Big Lak	e Blvd. WA.		×3 -	provide the Un identifier (UBI) building is Regis	itied Business	USETAX

MAILING ADDRESS OF FANTLEDAL OWNER TOTAL FEES & TAX More than two owners or one P.O. BOX 5857 lienholder? Please use attachment \$ C-Dform(s) #TD-420-732 WA 98046 LYNNWOOD DEALER'S REPORT OF SALE SIGNATURE OF LEGAL OWNER IND PAT Ìκ, TILE REMOVAL I certify that this information is correct. The vehicle is clear FROM REAL PROPERTY of encumbrances except as shown WA DER NO DATE OF SALE PURCHASE PRICE Anyone who knowingly makes a transferrent of a marrial fact is guilty of a telony, and upon conviction may be punished by a the of up to \$5,000 and/or 10 years imprisonment 4278 \$ (RCW 46.12.210). I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW TAX JURISDICTION/TAX RATE DEALER NAME THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMA-TION IS ACCURATE ... Owner Signature(s) & Title(s);  $Z_{\sim}$ X ð n X qs, ~ de USE TAX EXEMPT Sale to a Certified Tribal member on X the reservation (attach notarized statement of delivery) NOTARY OF LICENSE MENTLE NUMBER Residing in (Conty) SUBSCRIBED TO AND SWORN BEFORE ME THIS DAY OF LUCOMMENTS 96 nohomich X. U 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 NAM OFFICE VES OPERATOR NUMBER | DATE uptar Verres 1-30-91 29-01-10 EK1024F30602 TD-420-729 MANUE HOME AP\*\*\*



## LEGAL DESCRIPTION OF LAND

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application 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:

X Title Elimination Removal From Real Property Transfer In Location

Land:

Legal Description:

That portion of Lot 107, "First ADDITION TO BIG LAKE WATER FRONT TRACTS, SKAGIT COUNTY, WASHINGTON", as per plat recorded in Volume 4 of Plats, Page 15, records of Skagit County, Washington, lying Westerly of Big Lake Boulevard as conveyed to Skagit County for road by Deed recorded March 2, 1955, under Auditor's File No. 513932.



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BK 1624 FG 0603