

## RETURN ADDRESS

ISLAND TITLE COMPANY

P.O. Box 1228

Anacortes, WA 98221

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<b>STATE OF WASHINGTON</b> Department of <b>Licensing</b>		<b>MANUFACTURED HOME APPLICATION</b>	
<b>PLEASE CHECK ONE</b>			
<input checked="" type="checkbox"/> TITLE ELIMINATION		<input type="checkbox"/> TRANSFER IN LOCATION	
SA-16213		<input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
<b>1 MANUFACTURED HOME</b>			
TPO / PLATE NUMBER 827199	YEAR 81	MAKE GLENB	LENGTH/WIDTH(FEET) 52 X28
VEHICLE IDENTIFICATION NUMBER (VIN) ORFL2AA40382788			
<b>2 LAND</b>		ADDITIONAL LEGAL DESCRIPTION ON PAGE <u>3</u>	
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		PROPERTY TAX PARCEL NUMBER P73201	
LOT 7-13,15-20	BLOCK 145	PLAT NAME FIDALGO CITY	SECTION/TOWNSHIP/RANGE
A legal description can be obtained from the local County Assessor's Office. If there is not enough room here, use the Application Attachment form, TD-420-732, available at your local County Auditor's Office.			TITLE FEES
			FILING FEE
			APPLICATION
			MOBILE HOME FEE
			ELIMINATION FEE
			USE TAX
			SUB-AGENT FEES
			TOTAL FEES & TAX
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>		ADDITIONAL NAMES ON PAGE <u>4</u>	
COUNTY #	INCORPORATED	UNINCORPORATED	# REGISTERED OWNERS
NAME OF FIRST REGISTERED OWNER Kinslow, Arvel R.		DOL CUSTOMER ACCOUNT NUMBER Kinslow 635 ME	
ADDRESS OF FIRST REGISTERED OWNER 1497 Lincoln St.		CITY Anacortes	STATE WA
NAME OF FIRST LEGAL OWNER n/a		ZIP CODE 98221	
ADDRESS OF FIRST LEGAL OWNER		CITY	STATE
		ZIP CODE	
<b>GRANTEE(S)</b>		ADDITIONAL NAMES ON PAGE <u>4</u>	
NAME OF FIRST GRANTEE		DOL CUSTOMER ACCOUNT NUMBER	
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, imprisonment, or both. (RCW 46.12.210)		I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I / WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:	
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY:		<input checked="" type="checkbox"/> <i>Arvel Kinslow</i>	
<input checked="" type="checkbox"/> SIGNATURE OF FIRST LEGAL OWNER AND TITLE, IF APPLICABLE		SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE <i>Arvel Kinslow</i>	
NOTARY SEAL OR STAMP		NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
<b>OFFICIAL SEAL</b> DIANE L SULLIVAN Notary Public - State of Washington My Commission Expires 3-3-98		Signed or attested before me on <u>2-10-97</u> Signature <i>Diane L Sullivan</i> Printed Name of Applicant <i>Diane L Sullivan</i> DEALERSHIP Position/Agent/NOTARY <i>Notary</i>	
DEALER'S REPORT OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown.			
DEALER NAME		WA DEALER NUMBER	DATE OF SALE
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).			
<b>4 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)</b>			
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 (TYPED OR PRINTED)		COUNTY OFFICE/WFS OPERATOR NUMBER	
SIGNATURE <i>[Signature]</i>		DATE <u>2-10-97</u>	

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<b>5. TITLE COMPANY CERTIFICATION</b>	
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 / POSITION	DATE
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.	
<b>6. BUILDING PERMIT OFFICE CERTIFICATION</b>	
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.	
NAME	BLDG PERMIT OFFICE/PHONE #
SIGNATURE / POSITION	DATE

NAME: Brandon Black BLDG PERMIT OFFICE/PHONE #: SKAGIT COUNTY PERMIT CENTER 336-9410  
 SIGNATURE / POSITION: [Signature] Permit Technician DATE: 2-12-97

### INSTRUCTIONS

COMPLETE THE APPROPRIATE BOXES ON THE FORM AS INDICATED BELOW, DEPENDING UPON THE TRANSACTION YOU WISH TO PROCESS.

- A. Manufactured Home Title Elimination Application** (complete boxes 1, 2, 3, 4 and 6). Use to eliminate a title for a manufactured home which is to become real property.
- B. Manufactured Home Transfer In Location Application** (complete all boxes). Use only when a manufactured home (whose title has been eliminated) is being moved to land with a different legal description AND will become part of the real property to which it will be moved and affixed. If the transfer in location is between two different counties, prepare this form in duplicate and have each recorded in its respective county.
- C. Manufactured Home Removal From Real Property Application** (complete boxes 1, 2, 3, 4 and 5). Use when titling a manufactured home whose title has been previously eliminated. Once properly completed and recorded, this application becomes a supporting document along with others required to apply for a Certificate of Title for the manufactured home.

**IMPORTANT: SIGNATURES OF THE OWNERS ON THE MANUFACTURED HOME APPLICATION INDICATE TERMINATION OF INTEREST IN THE MANUFACTURED HOME THROUGH TITLE PROVIDED BY CHAPTER 46.12 RCW AND INDICATE INTENT TO PERFECT INTEREST IN THE MANUFACTURED HOME AS REAL PROPERTY WITH THE LAND HE/SHE/they OWN AND TO WHICH IT IS/WILL BE AFFIXED. IF THE MANUFACTURED HOME IS BEING REMOVED FROM REAL PROPERTY, SIGNATURES OF THE OWNERS PER THE REAL PROPERTY RECORDS INDICATE CONSENT TO THE REMOVAL. THE FORM MAY THEN BE USED FOR MAKING APPLICATION FOR TITLE WITH THE DEPARTMENT OF LICENSING AS PROVIDED BY CHAPTER 46.12 RCW.**

**Note:** Owners of the manufactured home must own the land when the application is for a Manufactured Home Title Elimination or a Manufactured Home Transfer In Location, as provided by Chapter 65.20 RCW.

**SECTION 1** Enter the description of the manufactured home.

**SECTION 2** Place an "X" in the appropriate box and enter the property tax parcel number, lot, block, plat number and section/township/range, when applicable. Write a legal description in the space provided. If there is not enough room, use the Title Application Attachment (TD0420-732). When processing a "Transfer in Location Application," both boxes should be checked. The application must then be accompanied by two separate land descriptions.

**SECTION 3** This area must be signed by all registered owners of the manufactured home when processing a title elimination. If the manufactured home has been sold and is being removed from the real property, the owners per the real property records must complete this portion to obtain a Certificate of Title. Signatures of the owners must be notarized or certified by the selling dealer or a vehicle licensing agent. Fees will include a filing and application fee plus sales or use tax due. Additional fees may include: a title elimination fee and a Mobile Home Affairs Fee. Subagents will charge an additional service fee. (Fees are subject to change without notice.)

**SECTION 4** Take the property completed Manufactured Home Application and all necessary supporting documents to the County Auditor/Licensing Agent Office for approval. Supporting documents may include but are not limited to: proof of ownership or a Manufacturer's Statement of Origin (MSO), proof of taxes paid, and applicable release(s) of interest. Subagents may not complete the approval portion of this form.

**SECTION 5** The "Title Company Certification" box must be completed when processing a "Transfer In Location" or a "Removal From Real Property" application. **Important:** The final recorded application form must be submitted to a vehicle licensing agent within 10 days of the title company's certification.

**SECTION 6** When processing an "Elimination" or "Transfer In Location" application, a city or county office (depending upon the location of the manufactured home) must certify that the home is affixed to the land or, issue a building permit to affix the manufactured home to the land, inspecting the completed attachment. The issuing office must sign the application, adding the permit number if the inspection has not yet occurred.

**IMPORTANT:** Once the application has been approved by the County Auditor/Licensing Agent Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.

**APPLICANTS:** Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees.

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (360) 902-3600 or TDD (360) 654-8885.

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MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT  
**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: ☒ Title Elimination  
☐ Removal From Real Property  
☐ Transfer In Location

Land: Property Tax Parcel Number P73201

Legal Description:

That portion of the followin described property lying Southerly of a line parallel with and 200 feet South of the North line of vacated South 20 feet of Fourth Street as shown on said Plat referred to in said description:

Lots 7 through 13, inclusive and lots 15 through 20, inclusive, Block 145, MAP OF FIDALGO CITY, SKAGIT COUNTY, WASHINGTON, according to the plat thereof recorded in Volume 2 of Plats, pages 113 and 114, records of Skagit County, Washington;

TOGETHER WITH those portions of the vacated street and alley adjoining said premises which upon vacation reverted to said premises by operation of law.

## OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. 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: ☒ Title Elimination  
☐ Removal From Real Property  
☐ Transfer In Location

PROPERTY TAX PARCEL NUMBER: **P73201**

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER <b>Kinslow, Elaine C.</b>	DOL CUSTOMER ACCOUNT NUMBER <b>Kinslow, Elaine C.</b>
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARY SEAL OR STAMP	
NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
State of Washington County of Skagit	Signed or attested before me on <b>2-6-97</b>
DIANE SUTTON Notary Public - State of Washington My Commission Expires 3-3-98	Printed Name of Applicant <b>Diane L. Sutton</b> Signature <b>Diane L. Sutton</b>
DEALERSHIP Position/Agent/NOTARY	
Dealer No. OR AND: County/Office No. OR Notary Expiration Date <b>3-3-98</b>	

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