RETURN ADDRESS

| RETURN ADDRESS | 97 NOV 14 A9:01 |
|--|---|
| Washington Mutual Bank: Barbara | • |
| 1336 Cornuall | FLÉCRICE DE |
| Pellingham, WA 98225 9711140014 | REQUEST OF |
| | • |
| O DELOCATION OF CHACIT COUNTY | |
| P-81361 LAND TITLE COMPANY OF SKAGIT COUNTY | |
| STATE OF WASHINGTON MANUFACTURED HO | ME |
| ICENSING APPLICATION | |
| PLEASE CHECK: ONE | THE TOTAL PROPERTY |
| ☑ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐! | REMOVAL FROM REAL PROPERTY |
| MANUFACTURED HOME TPO / PLATE NUMBER YEAR MAKE LENGTHANIDTH (FEET) VEHICLE | EIDENTIFICATION NUMBER (VIN) |
| 1997 PALM HARBOR (A) X AS PUB | TION ON PAGE 3 TITLE FEES |
| PROPERTY | Y TAX PARCEL NUMBER FILING FEE |
| <u>L4170</u> | -000-017-0809 APPLICATION SECTION/TOWNSHIP/RANGE |
| | MOBILE HOME FEE |
| A legal description can be obtained from the local County Assessor's Office. If ther use the Application Attachment form, TD-420-732, available at your local County A | e is not enough room here, uditor's Office. |
| SHORT LEGAL: PORTION OF LOT 1 OF SEDRO WOOLLEY | ı |
| RECORDED UNDER FILE NO. 9208120085 | SUB-AGENT FEES |
| | TOTAL FEES & TAX |
| | 45.25 |
| GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAM | |
| COUNTY INCORPORATED UNINCORPORATED REGISTERED OWNER SKAGIT Y | |
| NAME OF FIRST RECISTERED OWNER JIM DEITZ | De ITZ 1 H 567 D |
| ADDRESS OF FIRST REGISTERED OWNER . CITY | STATE DP CODE WA 98284 |
| 911 Highway 9 South Sedro Woolley NAME OF FIRST LEGAL OWNER | DOL CUSTOMER ACCOUNT NUMBER |
| WASHINGTON MUTUAL BANK ADDRESS OF FIRST LEGAL OWNER BOLL SORTH | STATE ZIP CODE 98225 |
| 1336 Cornwall Bellingham GRANTEE(S) ADDITIONAL NAME | MES ON PAGE |
| NAME OF FIRST GRANTEE | DOL CUSTOMER ACCOUNT NUMBER |
| Anyone who knowingly makes a false statement of a material I DO SOLE | INLY ATTEST UNDER PENALTY OF PURJURY I / WE ARE THE REGISTERED OWNERS OF |
| punished by a fine, imprisonment, or both. (RCW 46.12.210) THIS VEHIC | LE AND THIS INFORMATION IS ACCURATE: |
| SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL PROM REAL PROPERTY: X | ema HDeits |
| 1/1 1 (Ma) (S 5) 997 SIGNATURE C | OF FIRST REGISTERED OWNER AND JITLE, IF APPLICABLE |
| | F SECOND-REGISTERED OWNER AND TITLE, IF APPLICABLE |
| ************************************** | Signed or attested |
| County of County of | Signed or attested 5-15-37 |
| OF OF STANCETH OND | // Signature MANIMULE |
| Printed Name of Arghesty Notar | |
| TANTON SE DESCRIPTION STREET TO THE SECOND TARK | Notary Expiration Date |
| | |
| Though the second of the secon | rehicle is clear of encumbrances except as shown |
| DEALER'S REPUBLICATION CONTROL THE DEALER HAVE | WA DEALER NUMBER DATE OF SALE |
| TALM HARBOR VILLAGE 111. VERLOAD | VATURE S |
| |) |
| USE TAX EXEMPT Sale to a Certified Tribal member on the received COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for the county Auditor/AGENT LICENSING OFFICE APPROVAL: (Not for the county Auditor/AGENT LICENSING OFFICE APPROVAL: (Not for the county) | ise by Sub-Agents) <u>a sa</u> |
| I certify that the above application appears to have been completed correctly, at | nd the applicant has sufficient documentation to |
| proceed with the recording of this form. NAME (TYPED OR PRINTER!) | COUNTY OF POPE OPERATOR NUMBER |
| SUCCESION SEE | DATE 11-115-G |

TD-420-720 MANUF HOME APPL (R/12/96)OR Page 1 of 2

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|--|--|-------------------------|
| 5. TITLE COMPANY CERTIFICATION | | |
| I certify that the legal description of the land and owner | rship is true and correct per the real property records. | |
| NAME | TITLE COMPANY/PHONE NUMBER | - |
| SIGNATURE / POSITION : | | DATE |
| Finalize this application with a Licensing Agent w | vithin 10 calendar days of the date Title Company Repr | esentative signs. |
| POUR PERMIT OFFICE CERTIFICATION | | |
| I certify that the manufactured home has been affixed purpose and the attachment will be inspected upon co | to the real property as described, OR a building permit hompletion | es been issued for this |
| NAME/2011 HEGIS | S 3/6 360-855077/ | 11/6/97 |
| SIGNATURE / POSIDON | Description of the case | DATE - / |

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 ISWILL 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 properly 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 pity 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.
- Once the application has been approved by the County Auditor/Leanuing Agent Office, lake your application form to the County Recording Office. Retain proof of the recording less 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) 664-8885.

TD-420-729 MANUF HOME APPL (R/12/95)OR Page 1 of 2

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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.

| | Title Elimination Removal From Real Property Transfer In Location | |
|--|---|--|
| PROPERTY TAX PARCEL NUMBER: | 4170-000-017-0809 | |
| ADDITIONAL GRANTOR(S) REGISTE | RED/LEGALOWNER(S) | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF REGISTERED OWNER | | |
| DEBBIE DEITZ | , | DEITZ DE 4 65 M4 BOLCUSTOMER ACCOUNT NUMBER |
| NAME OF REGISTERED OWNER | | MYREATURICANS |
| TAMI MYRE NAME OF REGISTERED OWNER | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF REGISTERED OWNER | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF REGISTERED OWNER | | DOL COSTOMER ACCOUNT NUMBER |
| | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF REGISTERED OWNER | | |
| | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF LEGAL OWNER | | |
| NAME OF LEGAL OWNER | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF FEGUR OALIVEL | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF LEGAL OWNER | | DOCCUSTOMEN ACCOUNT NUMBER |
| | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF LEGAL OWNER | | |
| | | DOL CUSTOMER ACCOUNT NUMBER |
| NAME OF LEGAL OWNER | | |
| | DICATES CONSENT FOR ELIMINATION OF | TITLE: |
| | JICATES CONSENT TOTT ELECTRICATE | DOL CUSTOMER ACCOUNT NUMBER |
| SIGNATURE OF LEGAL OWNER | | |
| SIGNATURE OF LEGAL OWNER | | DOL CUSTOMER ACCOUNT NUMBER |
| ł control of the cont | | |
| Anyone who knowingly makes a fall by a fine, imprisonment, or both. (R I DO SOLEMNLY ATTEST UNDER P VEHICLE AND THIS INFORMATION | CW 46.12.210) PENALTY OF PURJURY LAW THAT I/WE AR | elony, and upon conviction may be punished E THE REGISTERED OWNERS OF THIS |
| SIGNATURE OF REGISTERED OWNER | | at lon |
| Train min | | DATE |
| SIGNATURE OF REGISTERED OWNER | | |
| | | DATE |
| SIGNATURE OF REGISTERED OWNER | • | |
| SIGNATURE OF REGISTERED OWNER | | ÓATE. |
| • | | DATE |
| SIGNATURE OF REGISTERED OWNER | _ | |
| ANTEN SERVER SERVER | NOTARIZATION/CERTIFICATION FOR F | EGISTERED OWNER(S) SIGNATURE |
| | 10. | Signed or criented and a second |
| SIUN EL SI | county of Market | before mean .5 - 16 - 9 |
| SON OF ARLES | DIZECTH ONDILL | Signature State (M) (1) |
| W. C. PUBLIC | Printed Name MEXASSESSIX NOTALLY | AND: 808790 BACKET 9-20:00 |
| MARCA TO SOL THE | ile | Notary Expiration Date |
| | THE STREET OF STREET OF STREET | |

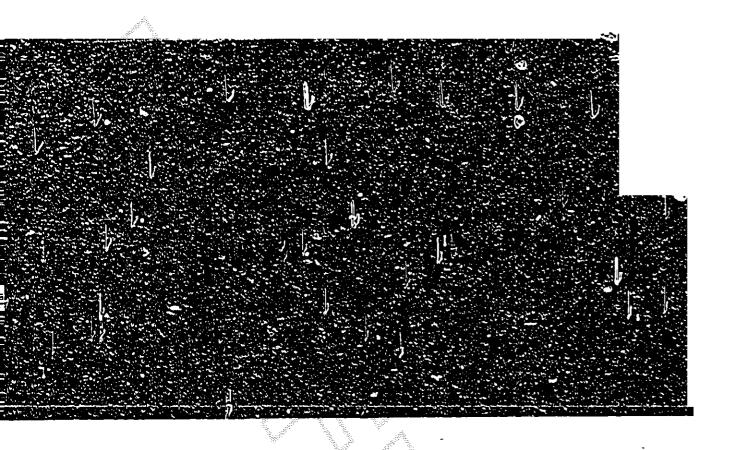
The Department of Licensing has a policy of providing equal access to its services:

If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.

TD-420-732 APP ATTACHMENT(R/12/96)OR Page 2 of 2

9711140014

BX 1 7 3 2 PS U 0 4 4





MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT LEGAL DESCRIPTION OF LAND

PAGE 3

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 | e of application: | Title Elimination Removal From Real Property |
|------------|-------------------|---|
| Land: | Property Tax F | Transfer In Location Parcel Number 4170-000-017-0809 |
| Lario. | Legal Descript | |

DESCRIPTION:

That portion of Lot 1 of Sedro-Woolley Short Plat No. W-94-92, as recorded August 12, 1992, in Volume 10 of Short Plats, page 110, under Auditor's File No. 9208120086, records of Skagit County, Washington, being a portion of Tract 17, "SEDRO ACREAGE", as per plat recorded in Volume 3 of Plats, page 35, records of Skagit County, Washington, lying Southerly of the following described line:

Beginning at the intersection of the South line of said Lot 1, with the East line of Maple Street; thence North 89°55'33" East, 304.15 feet to an angle point in said South line, said point being the point of beginning of said line;

thence Easterly to intersect the Northwest corner of Lot 2 of said Short Plat, said point being the terminus of said line.

TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over, under and across the existing driveway as it crosses Lot 2 of said Short Plat.

Situate in the City of Sedro-Woolley, County of Skagit, State of Washington.

TD-420-732 APP ATTACHMENT(R/12/96)OR Page 1 of 2