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KATHY HILL
SKAGIT

RETURN ADDRESS

FIRST AMERICAN TITLE COMPANY

PO Box 1567

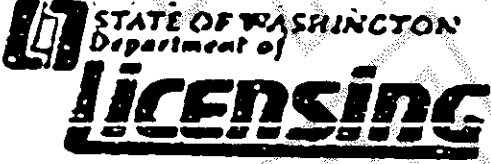
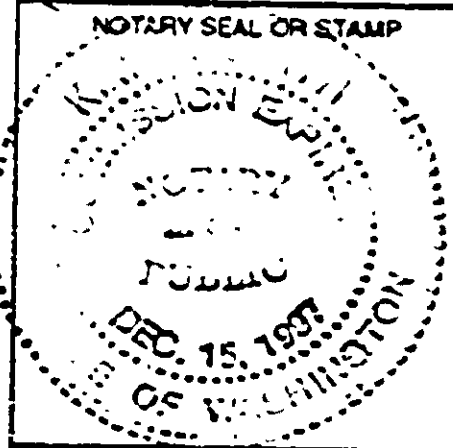
Mt. Vernon, WA 98273

01-53237

97 DEC 18 P3:48

RECORDED _____ FILED _____
REQUEST OF _____

9712180099

		MANUFACTURED HOME FIRST AMERICAN TITLE CO.	
		APPLICATION	
		S3237	
PLEASE CHECK ONE			
<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY			
1 MANUFACTURED HOME			
TPO / PLATE NUMBER	YEAR 1998	MAKE MODULINE	LENGTH/WIDTH/FEET 52 X 28
VEHICLE IDENTIFICATION NUMBER (VIN) 1-17349			
2 LAND			ADDITIONAL LEGAL DESCRIPTION ON PAGE
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			PROPERTY TAX PARCEL NUMBER 8877-000-159-0003 R6423
LOT 159	BLOCK	PLAT NAME CEDARGROVE ON THE SKAGIT	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. Lot 159, "CEDARGROVE ON THE SKAGIT", according to the plat recorded in Volume 9 of Plats, pages 48 to 51 inclusive, records of Skagit County, Washington.			TITLE FEES
			FILING FEE
			APPLICATION
			MOBILE HOME FEE
			ELIMINATION FEE
			USE TAX
			SUB-AGENT FEES
			TOTAL FEES & TAX
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)			
COUNTY SKAGIT	INCORPORATED	UNINCORPORATED	REGISTERED OWNERS 2
NAME OF FIRST REGISTERED OWNER DANNY C. WEBSTER		LEGAL OWNERS 1	
ADDRESS OF FIRST REGISTERED OWNER 4413 Baker Drive		CITY Concrete	STATE WA
NAME OF FIRST LEGAL OWNER FORD CONSUMER FINANCE		DOL CUSTOMER ACCOUNT NUMBER WEBSTDC43ART	
ADDRESS OF FIRST LEGAL OWNER 10121 SE SUNNYSIDE RD. SB. 265		CITY Clackamas	STATE OR
GRANTEE(S)		ZIP CODE 97015	
ADDITIONAL NAMES ON PAGE			
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: <i>[Signature]</i>			
SIGNATURE OF FIRST REGISTERED OWNER AND TITLE, IF APPLICABLE: <i>[Signature]</i>			
SIGNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE: <i>[Signature]</i>			
NOTARY SEAL OR STAMP		NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
		State of Washington County of SKAGIT	
		Signed or attested before me on 12/14/97	
		by KIM M. SMITH	
		Printed Name of Applicant	
		Signature <i>[Signature]</i>	
		Title ESCROW CLOSER	
		DEALERSHIP Position/Agent/NOTARY	
		Dealer No OR 12/15/97	
		AND: County/Office No OR	
		Notary Expiration Date	
DEALER'S REPORT OF SALE I certify that this information is correct. The vehicle is clear of encumbrances except as shown.			
DEALER NAME LAMPLIGHTER HOMES INC.		WA DEALER NUMBER 4600	DATE OF SALE 12/10/97
PURCHASE PRICE 59,155.00	TAX JURISDICTION/TAX RATE 7.8	DEALER'S AUTHORIZED SIGNATURE <i>[Signature]</i>	
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation. (attach notarized statement of delivery).			
4 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 (TYPED OR PRINTED)		DEPT. OF LICENSING	
SIGNATURE <i>[Signature]</i>		COUNTY OFFICE/OPS OPERATOR NUMBER 2901/07	
		DATE 12-18-97	

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5 TITLE COMPANY CERTIFICATION	
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.	
6 BUILDING PERMIT OFFICE CERTIFICATION	
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 #
Jody Ann Goodman	336-9410
SIGNATURE / POSITION	DATE
Jody Ann Goodman / Permit Technician	12/10/97

SKAGIT COUNTY PERMIT CENTER

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 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 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.

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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) 664-8235.

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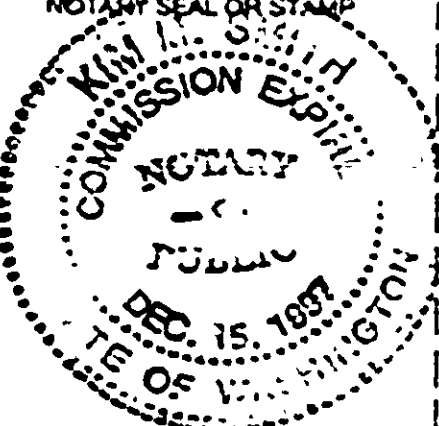
OWNERSHIP

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.

CHECK TYPE OF APPLICATION: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

PROPERTY TAX PARCEL NUMBER: 3877-000-159-0003 R64234

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER VALERIE A. WEBSTER	DOL CUSTOMER ACCOUNT NUMBER WEBSTVA389N2
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:	
SIGNATURE 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

	NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington County of SKAGIT	Signed or attested before me on 12/4/97
	by KIM M. SMITH Printed Name of Applicant	Signature Kim M. Smith
	Title ESCROW CLOSER DEALERSHIP Position/Agent/NOTARY	Dealer No. OR AND: County/Office No. OR Notary Expiration Date 12/15/97

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