## **RETURN ADDRESS**

		KATU	V III I		
GREEN TREE FINANCIAL SERVICIN	IG CORP.	SKAGI	Y HILL Y MIDITOR		
500 S. 336TH STREET, SUITE 20	2		16921028		
FEDERAL WAY, WA 98003	<del></del>	98 .sm :	24 All :59		
	<del> </del>	<b>9017 2</b>	4 #159		
	980624004	8 HECORDED	FILED		
STATE OF WASHINGTON MANU	EACTURED HO	TOT AND TOTAL	E COMPANY		
<u>licensing</u>	FACTURED HOLAPPLICATION  FASE CHECKONE  RIN LOCATION   RI	SB-12098 V	.PROPERTY		
MANUFACTURED HOME					
TPO / PLATE NUMBER YEAR MAKE	LENGTHWIDTH(FEET) VEHICLE I	DENTIFICATION NUMBER (VIN)			
	TONAL LEGAL DESCRIPTE	ON ON PAGE	TITLE FEES		
MANUFACTURED HOME WILL BE AFFIXED	REMOVED PROPERTY	TAX PARCEL NUMBER 00-007-0201	filing fee		
LOT BLOCK PLAT NAME	(3747-0	SECTION/TOWNSHIP/RANGE	APPLICATION		
A legal description can be obtained from the local Cour	nty Assessor's Office It there is	s not anough com hara	MOBILE HOME FEE		
use the Application Attachment form, TD-420-732, ava	ilable at your local County Aud	itor's Office.	ELIMINATION FEE		
THE NORTH 162 FEET OF THE WEST HAMILTON ACREAGE, ACCORDING TO	and the state of t		USE TAX		
VOLUME 2 OF PLATS, PAGE 87, REC			SUB-AGENT FEES		
WASHINGTON.		-	TOTAL FEES & TAX		
SITUATED IN SKAGIT COUNTY, WASH	IINGTON		1		
GRANTOR(S) REGISTERED/LEGAL OWNER(S)	ADDITIONAL NAMES	ONPAGE			
COUNTY INCORPORATED UNINCORPORA SKAGIT		LEGAL OWNERS			
NAME OF FIRST REGISTERED OWNER DOUGLAS J. SHERMAN		OOL CUSTOMER AS			
ADDRESS OF FIRST REGISTERED OWNER	CITY	STATE ZI	CODE		
NAME OF FIRST LEGAL OWNER	EDRO-WOOLLEY	DOL CUSTOMERA	98284 CCOUNT NUMBER		
GREEN TREE FINANCIAL SERVICING ADDRESS OF FIRST LEGAL OWNER	CORP.	(0)-(028)	CODE		
500 S 336TH STREET SUITE 202  GRANTEE(S)	FEDERAL WAY  ADDITIONAL NAMES	WA 98001	3		
NAME OF FIRST GRANTEE GREEN TREE FINANCIAL SERVICING		DOL CUSTOMER AND 601-628-402			
Anyone who knowingly makes a false statement of	a material I DO SOLEMNL	Y ATTEST UNDER PENAL			
fact is guilty of a felony, and upon conviction punished by a fine, imprisonment, or both. (RCW	The second secon	VE ARE THE REGISTERED AND THIS INFORMATION			
SIGNATURE OF LEGAL OWNER INDICATES CONS ELIMINATION OF TITLE / REMOVAL FROM REAL F	ENT FOR				
x X JUGG JOL GT		AST RECOMERED OWNER AND TI	TLE, IF APPLICABLE		
SIGNATURE OF THE COALD WER ANOTH CE, IF APPLICABLE	SIGNATURE OF SE	COND REGISTERED OWNER AND	TITLE, IF APPLICABLE		
NOTARY ED CASTAMP NOTARIZAT	ION / CERTIFICATION FOR F	LÉGISTERED OWNER(S) S	IGNATURE		
State of Washington	SKAGIT	Signed or attested before me or. 1/28	/98		
	1 1100D TV ( ) 1	Salm L.			
	N HOUD I MAN d Name of Applicant	Segnature Segnature	There !		
	CARY	Dealer No. QR AND: County/Office No. QR	9-15-98		
DEALERS	HIP Position/Agent/NOTARY	Notary Expiration Date			
		<u> </u>			
DEALER'S REPORT OF SALE I cortify that this Info					
CEALER NAME COACH CORRAC I	NC	4278	0FSALE 2-1-98		
PUBCHASE PRICE TAX JURISDICTION/TAX PATE	DEALER'S AUTHORIZED STONATUR	Milpourn)			
USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).  COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Sub-Agents)					
certify that the above application appears to have bee			umentation to		
proceed with the recording of this form.  NAME (TYPED OR PRINTED)		COUNT DESCEN	S OFFATOR NUMBER		
1.11/2d/201		101	10000		
SIGNATURE MOUNTAIN		DATE	1-14 70		
D-420-729 MANUF HOME APPL (P/12/96)OR Page 1 of 2	INSTRUCTIONS AND AD	DITIONAL INFORMATION	ON REVERSE SIDE		

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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 cale	ndar days of the date Title Company Representative signs.
BUILDING PERMIT OFFICE CERTIFICATION	
I certify that the manufactured home has been affixed to the real propurpose and the attachment will be inspected upon completion	PERMIT NO. 97-1409
NAME JOANNE OSTLUND .	SLDG PERMIT OFFICE/PHONE # 360 336-9410
SIGNATURE / POSITION OSTlund Pernt Techane	CATE 6-24-98

## 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 little 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 titting 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.
- 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.

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.

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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.

CHECKTYPE OF APPLICATION: Tide Elimination

Bemoval From Real Property

Transfer In Location

PROPERTY TAX PARCEL NUMBER:	3947-000-007-0201	]	
ADDITIONAL GRANTOR(S) REGIS	TERED/LEGAL OWNER(S)		
NAME OF REGISTERED OWNER		DALCHSON	ER ACCOUNT NUMBER
STACEY R. RUDIG		RUDIGSR34	
NAME OF REGISTERED OWNER		DOL CUSTOM	ER ACCOUNT NUMBER
NAME OF REGISTERED OWNER		DOL CUSTOM	ER ACCOUNT NUMBER
NAME OF REGISTERED OWNER		DOL CUSTOM	ER ACCOUNT NUMBER
NAME OF REGISTERED OWNER		DOL CUSTOM	EA ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOLCUSTON	ER ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOL CUSTON	ER ACCOUNT NUMBER
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SIGNATURE OF LEGAL OWNER		DOL CUSTOM	ER ACCOUNT NUMBER
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SIGNATURE OF REGISTERED OWNER			DATE
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SIGNATURE OF REGISTERED OWNER			DATE
SIGNATURE OF REGISTERED OWNER			DATE
NOTARY SEAL OR STAMP		-	
	NOTARIZATION/CERTIFICATION FOR REGIS	STERED OWNER(S) S	IGNATURE
State	of Washington County of	Signed or attested before me on	
		-	
БУ_	Printed Name of Applicant	Signature	
Titles		Dealer No. OR AND: County/Office No. OR	
	DEALERSHIP Position/AgenuniOTARY	Notary Expiration Date	

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