KATHY III.

	1	SKAC	SIT COUN
ETURN ADDRESS	SKAGIT HILL THOS	₹	
ORWEST ESCROW	SKAGI	92	0CT -6
509A RIVERSIDE DRIVE	C M1 '35	•	
MOUNT VERNON, WA 98273 9810060073	98 OCT -6 A11:35	· £	CRDED
307000010	FILEU	_	REQUEST: OF
	REQUEST OF		
	116 4 5 5		
APPLICATION PLEASE CHECK PLE	ONE REMOVAL FROM REAL	1	
	4632-000-010-0009	APPLICATION	
10 PLAT NAME VALLEY P.U.D.		MOBILE HOME FEE	
A legal description can be obtained from the local County Assessor's Office		ELIMINATION FEE	
LAT AA OPACIE VALLEV DII O MAMAA PEK PLAI	KECONDED IN VOCONE	USE TAX	
115 OF PLATS, PAGES 181 TO 183, INCLUSIVE AND	RECORDS OF SKAGIT	SUB-AGENT FEES	
COUNTY, WASHINGTON.		TOTAL FEES & TAX	
		ł	
ADDITION	AL NAMES ON PAGE		
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITION COUNTY INCORPORATED UNINCORPORATED PREGISTERE	DOWNERS LEGAL OWNERS		ļ
NAKOF SIRS TREGISTERED OWNER	TO DAVISSA	ACCOUNT NUMBER	
ADDRESS OF FIRST HEGISTERED OWNER SEDRO WOOLLEY	STATE WA	ZIP CODE 98284	
NAME OF FIRST LEGAL OWNER	DOL CUSTOMER	ACCOUNT NUMBER	
ADDRESS OF FRATLEGAL OWNER. SUITE 1000, MINNEAPOLIS	SW ^{TE} 5	75402 5402	
GRANTEE(S) ADDITION	IAI MARIES DWPAGE	ACCOUNT NUMBER	1
NAME OF FIRST GRANTEE			-
Anyone who know its process of the second se	NATURE OF FIRST REGISTERED DWNER AND THIS INFORMATION OF SECOND REGISTERED DWNER AND THOM FOR REGISTERED OWNER SIGNED OF SECOND REGISTERED OWNER SECOND REGISTERED OWNER SIGNED OF SECOND REGISTERED OWNER SECOND REGISTERED SECOND REGISTER	TIXE PAPPLICABLE MO TITLE, IF APPLICABLE SIGNATURE	
SHARON DAVIS Printed Name of Applicant CARRIE HUFFER	Signature Dealer No. OR AND: County/Office No. O	12/31/99	
DEALERSHIP Position/Agent/NO			
DEALER'S REPORT OF SALE I certify that this information is corre	sct. The vehicle is clear of encumbra	nces except as showi	<u>'-</u>
DEALER NAME CAMPBELL HOMES - OR VAYASY	1	79-2148	
PURCHASE PRICE TAX JURISDICTIONTAX RATE PEATER'S AUTHOR			
USE TAX EXEMPT Sale to a Certified Tribal member on the	reservation (attach notarized statem	ent of delivery).	
4 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (I certify that the above application appears to have been completed control to the complete control to the complete control to the cont	rectly, and the applicant has sufficient	documentation to	
proceed with the recording or this form.	COUNTY OFF	CENTS OPERATOR NUMB	ER /
NAME (TYPED OR PRINTED)	<u> </u>	7-01.08	

9810060073

NAME (TYPED OR PRINTED)

TD-420-729 MANUF HOME APPL (FV12/96)OR Page 1 of 2

INSTRUCTIONS AND ADDITIONAL INFORMATION ON REVERSE SIDE BK1875 00432

10708 1999

5 TITLE COMPANY CERTIFICATION			
I certify that the legal description of the land	and ownership is true and	correct per the real proper	rty records.
NAME YLANCY GRAY		TITLE COMPANY/PHONE NUMBER 360-424-C	
SIGNATURE / POSITION MANY	Title	assistant	DATE
Finalize this application with a Licensin	ig Agent within 10 calend	ar days of the date Title Co	ompany Representative signs.
5 BUILDING PERMIT OFFICE CERTIFIC	ATION	_	
I certify that the manufactured home has be purpose and the attachment will be inspecte	en affixed to the real proper d upon completion	orty as described, OR a but	Iding permit has been issued for this
NAME ISA CAMPBELL	SKAGIT COUNTY	PERSONNE .	360/336-9410
SIGNATURE 1 DOS 17 JAN Jungbell Per	uit Processie	gheet	10/6/98.

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 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 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) 664-8885.

TD-420-729 MANUF HOME APPL (R/12/96)OF Page 1 of 2

9810060073

18K 1879PG0433

008 1999

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 ticensing agency as part of the supporting documentation for a Manufactured Home application.

Removal From Real Property

Transfer In Location

		_
PROPERTY TAX PARCEL NUMBER:	4632-000-010-0009	1
ADDITIONAL GRANTOR(S) REGIST	ERED/LEGAL OWNER(S)	
VALUE OF REGISTERED OWNER		DOLCUSTOMER ACCOUNT NUMBER
GUFFIE, ODELL	the state of the s	(SUFF 1057240T
VAME OF REGISTERED OWNER GUFFIE, MARGARET		GUFF 1057240T COLCUSTOMER ACCOUNT NUMBER GUFF 1 M E 729 CM
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
IAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
IAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER IND	ICATES CONSENT FOR ELIMINATION OF TIT	rue:
SIGNATURE OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
by a fine, Imprisonment, or both. (RC	NALTY OF PURJURY LAW THAT IWE ARE 1	The state of the s
Odel Litis		
SIGNATURE OF REGISTERED DYNER		DNE->1-98
SIGNATURE OF REGISTERED OWNER		DATE
SIGNATURE OF REGISTERED OWNER		ONE
SIGNATURE OF REGISTERED, OWNER		DATE
NOTARY SEAL CHEMINATURE	NOTARIZATION/CERTIFICATION FOR REG	ISTERED OWNER(S) SIGNATURE
510A (to)	of Washington SKAGIT	Signed or attested 2/25/98
TO SOME THE OD	ÉLL & MARGARET GUFFIE	. 111
	Printed Name of Applicant	Signature
1, 2, 31.99 (c)	CARRIE HUFFER	AND: County/Office No. OR 12/31/99
OF WASHER	DEALERSHIP Position/Agen/NOTARY	Notary Expiration Date

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(FV12/96)OR Page 2 of 2

CHECK TYPE OF APPLICATION: Title Elimination
Removal From F

BK 1879PG 0434

9810060073