



200002290133
Kathy Hill, Skagit County Auditor
2/29/2000 Page 1 of 2 4:08:13PM

RETURN ADDRESS

ISLAND TITLE COMPANY

P. O. BOX 1228

ANACORTES, WA 98221

SA-19434

AE6927



MANUFACTURED HOME
APPLICATION

PLEASE CHECK ONE

- ☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ REMOVAL FROM REAL PROPERTY

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)

1 MANUFACTURED HOME

TPO / PLATE NUMBER	YEAR 2000	MAKE Marlette	LENGTH/WIDTH(FEET) 60' X 28'	VEHICLE IDENTIFICATION NUMBER (VIN) H-018531 A/B
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2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED

REAL PROPERTY TAX PARCEL NUMBER
3822-000-101-0008

LOT 101	BLOCK	PLAT NAME SKYLINE NO. 6	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
LAURA A. HASTINGS

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS 4630 Devonshire Drive	CITY Anacortes	STATE WA	ZIP CODE 98221
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NAME OF LEGAL OWNER
LAURA A. HASTINGS

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS 4630 Devonshire Drive	CITY Anacortes	STATE WA	ZIP CODE 98221
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GRANTEE

NAME

I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE *Laura A. Hastings*

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of Skagit
Signed or attested before me on 02/22/00
by Laura A. Hastings
PRINT NAME OF REGISTERED OWNER
Signature *[Signature]*
NOTARY OR AGENT
by Jean A. Crandall
PRINT NAME OF NOTARY
County/Office No. OR
Title Notary Public AND: Dealer No. OR 7/15/01
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date

4 TITLE COMPANY CERTIFICATION

I certify that the legal description of the land and ownership is true and correct per the real property records.

NAME (TYPED OR PRINTED) 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.

5 BUILDING PERMIT OFFICE CERTIFICATION

I certify that: ☒ the manufactured home has been affixed to the real property as described.
☐ a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED) ROBERT OSBORNE	BLDG PERMIT OFFICE/PHONE # 293-1901	BLDG PERMIT #
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SIGNATURE / POSITION *Robert Osborne Building Inspector* DATE 2-28-00

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SIGNATURE OF LEGAL OWNER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
County of Skagit

Signed or attested
before me on 02/22/00

by Laura A. Hastings
PRINT NAME OF LEGAL OWNER

by Jean A. Crandall
PRINT NAME OF NOTARY

Title Notary Public
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR
Dealer No. OR 7/15/01
Notary Expiration Date

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LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)

Lot 101, SKYLINE NO. 6, according to the plat thereof recorded in Volume 9 of Plats, pages 64 to 67A, inclusive, records of Skagit County, Washington;

Situated in Skagit County, Washington.

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DEALER'S REPORT OF SALE

I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

DEALER NAME (TYPED OR PRINTED)

WA DEALER NUMBER

DATE OF SALE

PURCHASE PRICE

TAX JURISDICTION/TAX RATE

DEALER'S AUTHORIZED SIGNATURE

USE TAX EXEMPT

Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).

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COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)

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/VFS OPERATOR NUMBER

SIGNATURE

DATE

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TITLE FEES

FILING FEE

APPLICATION

MOBILE HOME FEE

ELIMINATION FEE

USE TAX

SUBAGENT FEES

TOTAL FEES & TAX

IMPORTANT:

Once the application has been approved by the County Auditor / Vehicle Licensing 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. Vehicle licensing subagents charge a service fee.

For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.