RETURN ADDRESS

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200003150011 Kathy Hill, Skagit County Auditor
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P-84449-E	3/15/2000 Page 1 of 3 9:05:06AM
STATE OF WASHINGTON MANUFACTUR	RED HOME
ICENSING APPLICA	
PLEASE CHE	
☐ TITLE ELIMINATION ☐ TRANSFER IN LOCATION	ON REMOVAL FROM REAL PROPERTY
MANUFACTURED HOME TPO PLATE NUMBERS YEAR MAKE LENGTH WIDTHER	CETA L VEHICLE IDENTIFICATION AND MOSE AND
+67190 86 Fleetwood 48 X	
MANUFACTURED HOME WILL BE AFFIXED REMOVED	L DESCRIPTION ON PAGE TITLE FEES PROPERTY TAX PARCEL NUMBER FILING FEE
R68621	PROPERTY TAX PARCEL NUMBER 3989-001-005-1000 APPLICATION APPLICATION
	MOBILE HOME SEE
A legal description can be obtained from the local County Assessor's Cuse the Application Attachment form, TD-420-732, available at your local County Assessor's County Assess	al County Auditor's Office.
Tract "B" of Skagit County SHort Plat No. recorded in Book 1 of Short Plats, pg. 158	39-76, approved 8/9/76,
a ptn. of Tract 5 of "L.W.L. CO'S SAMISH	
SKAGIT CO., WASHINGTON", as per plat reco	rded in Volume 3 of Plats,
page 69, records of Skagit County, Washin	gton.
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITI	ONAL NAMES ON PAGE
	ERED OWNERS LEGAL OWNERS
NAME OF FIRST REGISTERED OWNER Robert A. Nelson	DOL CUSTOMER ACCOUNT NUMBER NELSORA418N1
ADDRESS OF FIRST REGISTERED OWNER 1486 Bradley Rd., Bow, WA 98232	
NAME OF FIRST LEGAL OWNER Horizon Bank	DOL CUSTOMER ACCOUNT NUMBER
ADDRESS OF FIRST LEGAL OWNER P.O. Box 580, Bellingham, WA 98227	STATE ZIP CODE
GRANTEE(S) ADDITI	DNAL NAMES ON PAGE
NAME OF FIRST GRANTEE	DOL CUSTOMER ACCOUNT NUMBER
liact is guilty of a felony, and upon conviction may be 1/	OO SOLEMNLY ATTEST UNDER PEMALTY OF PURJURY AW THAT LAWE ARE THE REGISTERED OWNERS OF
	IS VEHICLE AND THIS INFORMATION IS ACCURATE:
ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY: X	
X recent recent X	IGNATURE OF MAST REGISTERED OWNER AND TITLE, IF APPLICABLE
	GNATURE OF SECOND REGISTERED OWNER AND TITLE, IF APPLICABLE ATION FOR REGISTERED OWNER(S) SIGNATURE
State of Washington	
County of	Skagit Signed or allested 4/22/98
by Robert A & Carol M. Printed Name of Applicant	
Title Notary	Dealer No. OR 01/01/01
DEALERSHIP Position/AgenVN	OTARY Notary Expiration Date
DEALER'S REPORT OF SALE I certify that this information is corr DEALER NAME	
	WA DEALER NUMBER DATE OF SALE
PURCHASE PRICE TAX JURISDICTION/TAX FIATE DEALER'S AUTHOR	
USE TAX EXEMPT Sale to a Certified Tribal member on the COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (1)	
I certify that the above application appears to have been completed cor	rectly, and the applicant has sufficient documentation to
proceed with the recording of this form. NAME (TYPED OR PRINTED)	COUNTY OFFICENES OPERATOR NUMBER
SIGNATURE SIGNATURE	DATE LE LE
legon Keedel	3/15/00
TD-420-729 MANUF HOME APPE (RV12/96)OR Page 1 of 2 INSTRUCTION	ONS AND ADDITIONAL INFORMATION ON REVERSE SIDE

TITLE COMPANY	/ CERTIFICATIO	N		
I certify that the legal	description of the	land and ownership is tr	IIO and correct per the real very	
Certify that the legal description of the land and ownership I		and and difficulting is the	TITLE COMPANY/PHONE NUMBER	rty records.
SIGNATURE / POSITION		·.	•	DATE:
Finalize this applic BUILDING PERMI	cation with a Lice	ensing Agent within 10 c	alendar days of the date Title Co	ompany Representative signs.
I certify that the manuf purpose and the attact NAME	lactured home ha	HEICATION	I property as described, OR a buil	ilding permit has been issued for this
TAWNE BOS	a a	skagit round		SL 336-9410
Jauxei 1	Bornar	n Supp	ou Services	03/13/00

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 INTERT 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. Eees 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.
- 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.



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.

Removal From Real Property
Transfer In Location

		- 1000 /pic0c01	1	
PROPERTY TAX PARCEL NUMB	3989-001-00)5-1000/R68621		•
ADDITIONAL GRANTOR(S) RE	GISTERED/LEGAL OWN	ER(S)		
NAME OF REGISTERED OWNER				OMER ACCOUNT NUMBER
Carol M. Nelson			NELSOCM4	
NAME OF REGISTERED OWNER			DOL CUST	OMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER			DOL CUST	OMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER			DOL CUST	OMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER			DOL CUST	OMER ACCOUNT NUMBER
NAME OF LEGAL OWNER			DOL CUS	OMER ACCOUNT NUMBER
NAME OF LEGAL OWNER			DOL CUS	TOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER			DOL CUS	TOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER			DOL CUS	TOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER			DOL CUS	TOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNE	R INDICATES CONSENT	FOR ELIMINATION OF TIT	rle:	
SIGNATURE OF LEGAL OWNER			DOL CUS	TOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER			DOL CUS	TOMER ACCOUNT NUMBER
Anyone who knowingly makes by a fine, imprisonment, or bot I DO SOLEMNLY ATTEST UND VEHICLE AND THIS INFORMA	th. (RCW 46.12.210) DER PENALTY OF PURJUF		Na Carlotte	OWNERS OF THIS
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
NOTARY SEAL OR STAMP	NOTARIZATION/	CERTIFICATION FOR REG	STERED OWNER	S) SIGNATURE
	State of Washington		Signed or attested before me on	
	County of	,	Delote me on	
	by		_ Signature	<i>41. </i>
	Printed Name	e of Applicant	Dealer No. OR	
	Title	sition/Agent/NOTARY	_ AND: County/Office No. Notary Expiration	ACC
And the state of t	•			

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

If you need special accommodation, please and (250) 2002-2500 or TDD (250) 564-9885

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

CHECK TYPE OF APPLICATION: A Title Elimination

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