

## RETURN ADDRESS

Mr. and Mrs. Alfred M. Foster

301 Widnor Drive

Mount Vernon, WA 98274



200004200070

Kathy Hill, Skagit County Auditor  
4/20/2000 Page 1 of 2 3:49:12PM

LTC

P-92330-E

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 <b>@29316</b>	YEAR <b>1975</b>	MAKE <b>SILCH</b>	LENGTH/WIDTH(FEET) <b>68 X 34</b>	VEHICLE IDENTIFICATION NUMBER (VIN) <b>OS5141UX</b>
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## 2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER  
**3771-000-033-0002/P54912**

LOT <b>33</b>	BLOCK	PLAT NAME <b>Widnor Drive</b>	SECTION/TOWNSHIP/RANGE
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## 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS <b>2</b>	NUMBER OF LEGAL OWNERS <b>1</b>
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NAME OF REGISTERED OWNER

**Alfred M. Foster**

NAME OF ADDITIONAL REGISTERED OWNER

**Eva A. Foster**

ADDRESS

**301 Widnor Drive**

CITY

**Mount Vernon**

STATE

**WA**

ZIP CODE

**98274**

NAME OF LEGAL OWNER

**Interwest Bank****303135008**

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS

**P.O. Box 1649**

CITY

**Oak Harbor**

STATE

**WA**

ZIP CODE

**98277**

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:

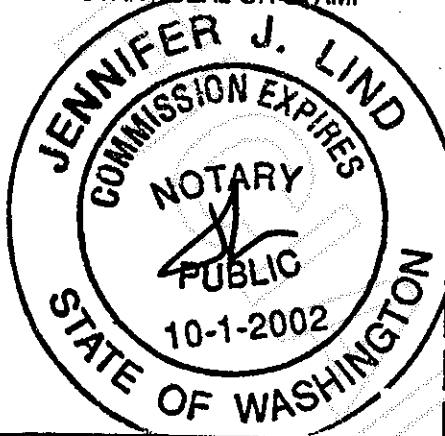
Signature of Registered Owner and Title, IF APPLICABLE

**Alfred M. Foster**

Signature of Additional Registered Owner and Title, IF APPLICABLE

**Eva A. Foster**

NOTARY SEAL OR STAMP



## NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington  
County of **Skagit**Signed or attested  
before me on**2-17-00**by **Alfred M. Foster**  
PRINT NAME OF REGISTERED OWNER

Signature

NOTARY OR AGENT

by **Eva A. Foster**  
PRINT NAME OF REGISTERED OWNER**Jennifer J. Lind**  
PRINTED NAME OF NOTARYTitle **Notary**

AND:

County/Office No. OR  
Dealer No. OR **10/01/02**  
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)

**Mike Snook**

BLDG PERMIT OFFICE/PHONE #

BLDG PERMIT #

**15516**

SIGNATURE / POSITION

**Mike Snook****3-16-00** DATE

<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <u>Cathy Collyer</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
<b>NOTARY SEAL OR STAMP</b>		<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>			
<b>LORRAINE M. BOUZA</b> <b>STATE OF WASHINGTON</b> <b>NOTARY --- PUBLIC</b> <b>MY COMMISSION EXPIRES 4-22-01</b>		State of Washington		Signed or attested before me on <u>02-22-00</u>	
		County of <u>ISLAND</u>			
		by <u>CATHY COLLYER</u>		Signature <u>Lorraine M Bouza</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
		by _____		<u>LORRAINE M. BOUZA</u>	
		PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY	
		Title <u>NOTARY</u>		AND: County/Office No. OR _____	
		DEALERSHIP POSITION/AGENT/NOTARY		Dealer No. OR <u>04-22-01</u>	
				Notary Expiration Date	
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
PARCEL "A": Lot 33, "WIDNOR DRIVE", as per plat recorded in Volume 9 of Plats, page 104, records of Skagit County, Washington. Situate in the City of Mount Vernon, County of Skagit, State of Washington.					
PARCEL "B": The North 1/2 of Lot 32, "WIDNOR DRIVE", as per plat recorded in Volume 9 of Plats, page 104, records of Skagit County, Washington. (Also known as Parcel "A" of Short Plat No. MV-20-76, approved June 10, 1976.) Situate in the City of Mount Vernon, County of Skagit, State of Washington.					
<b>8 DEALER'S REPORT OF SALE</b>					
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			
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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		
<u>PEGGY A. RIEDELL</u>			<u>29-01-04</u>		
SIGNATURE <u>Peggy A. Riedell</u>			DATE		<u>4/19/00</u>
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<b>IMPORTANT:</b> 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.					
<b>APPLICANTS::</b> 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.					

The Department of Licensing has a policy of providing equal access to its services.  
If you need special accomodations, please call 1-800-541-2295.



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