

## RETURN ADDRESS

LYNNWOOD ESCROW CORPORATION

P.O. BOX 5857

LYNNWOOD, WA. 98046

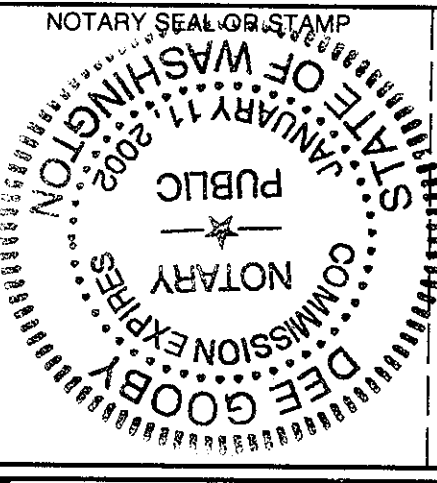
ESC. # 200157



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Kathy Hill, Skagit County Auditor  
6/8/2000 Page 1 of 2 3:46:14PM

STATE OF WASHINGTON Department of <b>Licensing</b>		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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)					
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2000	SKYLINE	66 X 28	9U910668M	
<b>2 LAND</b> LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER	
				4719-000-041-0000	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
41		"BAKerview WEST"			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b> ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
NAME OF REGISTERED OWNER					
Jose Olivarez Jr.					
NAME OF ADDITIONAL REGISTERED OWNER					
Geneva A. Olivarez					
ADDRESS	CITY		STATE	ZIP CODE	
2911 SchulerPlace	Mt. Vernon		WA.	98273	
NAME OF LEGAL OWNER					
Lynnwood Mortgage Corporation					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS	CITY		STATE	ZIP CODE	
P.O. Box 5010	Lynnwood		WA.	98046	
<b>GRANTEE</b>					
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 <i>Jose Olivarez Jr.</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Geneva A. Olivarez</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Snohomish Signed or attested before me on 6/8/00 by Jose Olivarez Jr. PRINT NAME OF REGISTERED OWNER Signature <i>Dee Gooby</i> NOTARY OR AGENT by Geneva A. Olivarez PRINT NAME OF REGISTERED OWNER Dee Gooby PRINTED NAME OF NOTARY Title Notary AND: County/Office No. OR Dealer No. OR 1-11-02 DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date			
<b>4 TITLE COMPANY CERTIFICATION</b>					
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.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.					
NAME (TYPED OR PRINTED)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
Rick E Prosser		Mount Vernon 360-336-6214		15477	
SIGNATURE / POSITION				DATE	
<i>Rick Prosser</i> Building Inspector/enforcement				6/11/00	

<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>Jack Golden, Sr. V.P.</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
		<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b> State of Washington _____ Signed or attested before me on <u>5-19-00</u> County of <u>Inshore</u> by <u>Lynwood MTC-Cone</u> Signature <u>[Signature]</u> <small>PRINT NAME OF LEGAL OWNER</small> <small>NOTARY OR AGENT</small> by <u>NANCY FONTAINE, Sr VP</u> <u>DEC 60034</u> <small>PRINT NAME OF LEGAL OWNER</small> <small>PRINTED NAME OF NOTARY</small> Title <u>NOTARY</u> <b>AND:</b> County/Office No. OR _____ <small>DEALERSHIP POSITION/AGENT/NOTARY</small> Dealer No. OR <u>14102</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>					
Lot 41, "PLAT OF BAKERVIEW WEST" AS PER PLAT RECORDED IN VOLUME 17, OF PLATS, PAGES 13 throure 16, inclusive, Records of Skagit County, Washington.  Situate in the 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) <u>COACH CORRAL INC</u>			WA DEALER NUMBER <u>4278</u>		DATE OF SALE <u>5-1-00</u>
PURCHASE PRICE <u>62720-</u>	TAX JURISDICTION/TAX RATE <u>7.8</u>	DEALER'S AUTHORIZED SIGNATURE <u>Linda Milbourn</u>			
<input type="checkbox"/> <b>USE TAX EXEMPT</b> 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) <u>REGGY A. RIEDELL</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-04</u>		
SIGNATURE <u>[Signature]</u>			DATE <u>6/8/00</u>		
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p><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.</p> <div style="border: 1px solid black; padding: 10px; margin: 10px 0;"> <p><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.</p> </div> <p>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.</p>					

The Department of Licensing has a policy of providing equal access to its services.  
 If you need special accommodation, please call (360) 892-2600 or 1-888-54-8885.



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