

RETURN ADDRESS

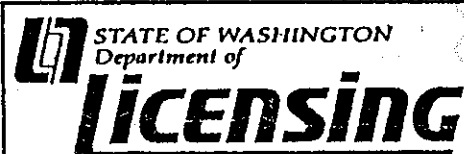
Richard A. Hackett

46622 N. Baker Loop

Concrete, WA 98237

200007200096
Kathy Hill, Skagit County Auditor
7/20/2000 Page 1 of 2 3:46:40PM

P-87484-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 +130081	YEAR 1997	MAKE Fleetwood	LENGTH/WIDTH(FEET) 52 X 27	VEHICLE IDENTIFICATION NUMBER (VIN) WAFLV31A1482QWC13
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2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
3877-000-189-0007/P64270

LOT 189	BLOCK	PLAT NAME Cedargrove on the Skagit	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER 29	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER

Richard A. Hackett

NAME OF ADDITIONAL REGISTERED OWNER

Mary Louise Hackett

ADDRESS

46622 N. Baker Loop

CITY

Concrete,

STATE

WA

ZIP CODE

98237

NAME OF LEGAL OWNER

Washington Mutual

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS

1336 Cornwall Avenue

CITY

Bellingham,

STATE

WA

ZIP CODE

98225

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

Richard A. Hackett

Signature of Additional Registered Owner and Title, IF APPLICABLE

Mary Louise Hackett

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of SkagitSigned or attested
before me on 12-16-98by Mary Louise Hackett
PRINT NAME OF REGISTERED OWNERSignature Candace M. Taylor
NOTARY OR AGENTby Richard A. Hackett
PRINT NAME OF REGISTERED OWNERCandace M. Taylor
PRINTED NAME OF NOTARY

Title Notary

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

DEALERSHIP POSITION/AGENT/NOTARY

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)

TAWNEE BOSMAN

BLDG PERMIT OFFICE/PHONE #

SKAGIT COUNTY PERMIT CENTER

336-9410

BLDG PERMIT #

97-0607

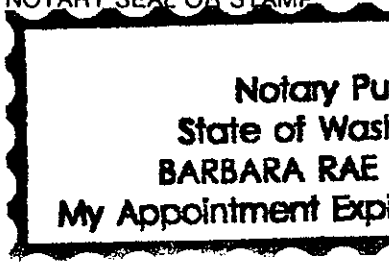
SIGNATURE / POSITION

Tawnee Bosman

Support Services

DATE

07/20/00

6 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 <u>BA Noble, Manager</u>					
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 <u>Whatcom</u>		Signed or attested before me on <u>7-10-00</u>	
		by <u>BA Noble</u> PRINT NAME OF LEGAL OWNER		Signature <u>[Signature]</u> NOTARY OR AGENT	
		Title <u>Manager</u> DEALERSHIP POSITION/AGENT/NOTARY		PRINTED NAME OF NOTARY <u>Barbara Rae Stilwell</u>	
				County/Office No. OR Dealer No. OR <u>4-3-04</u> Notary Expiration Date	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 189, "CEDARGROVE ON THE SKAGIT", as per plat recorded in Volume 9 of Plats, pages 48-51, inclusive, records of Skagit County, Washington, EXCEPT 50% of all mineral rights as reserved in Deed dated September 9, 1939 and recorded September 23, 1939, under Auditor's File No. 317248.					
Situate in the County of Skagit, State of Washington.					
8 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	
<input type="checkbox"/> USE TAX EXEMPT. Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
9 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) <u>PEGGY A. RIEDELL</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-04</u>		
SIGNATURE <u>[Signature]</u>			DATE <u>7/20/00</u>		
10 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.					

The Department of Licensing
If you need special accommo



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