

RETURN ADDRESS

Island Title Company
 PO Box 670
 Burlington WA 98233



200010100046
 , Skagit County Auditor

10/10/2000 Page 1 of 2 11:28:30AM

ISLAND TITLE CO. B10219 ✓

STATE OF WASHINGTON
 Department of
Licensing

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	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
&168977	2000	REDMAN	48 X 28	11827554

2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
 P74971

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
9	3	North Park Addition to Clear Lake	

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	1	1

NAME OF REGISTERED OWNER
 GARY L. BAKER

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS CITY STATE ZIP CODE
 P.O. BOX 374 CLEAR LAKE WA 98235

NAME OF LEGAL OWNER
 WESTERN SUNRISE AKA CROSSLAND MORTGAGE

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE
 411 108th Avenue N.E. Suite 1070 Bellvue WA 98004

GRANTEE
 NAME
 WESTERN SUNRISE AKA CROSSLAND MORTGAGE

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 Gary L. Baker

Signature of Additional Registered Owner and Title, IF APPLICABLE _____

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

NOTARY SEAL OR STAMP

State of Washington County of SKAGIT Signed or attested before me on Aug. 25, 2000

by Gary L. Baker Signature Linda Pierson
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by Linda Pierson
 PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title Notary Public AND: County/Office No. OR Dealer No. OR 3/19/03
 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)	BLDG PERMIT OFFICE/PHONE #	BLDG PERMIT #
TAWNEE BOSMAN	336 9410 SKAGIT COUNTY PERMIT CENTER	99-1750

SIGNATURE / POSITION DATE
Tawnee Bosman Support Services 10/10/00

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 Beth Gudmundson

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington _____ Signed or attested before me on <u>9/21/00</u> County of _____	
	by <u>Western Sunrise (aka Crossland Mortgage)</u> <small>PRINT NAME OF LEGAL OWNER</small> Signature <u>[Signature]</u> <small>NOTARY OF AGENT</small>	by <u>BETH GUDMUNDSON</u> <small>PRINT NAME OF LEGAL OWNER</small> Signature <u>[Signature]</u> <small>NOTARY OF AGENT</small> PRINTED NAME OF NOTARY <u>JOANIE A WOOD</u> <small>NOTARY OF AGENT</small> Title _____ AND: County/Office No. OR _____ Dealer No. OR _____ Notary Expiration Date <u>4/15/04</u>

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

Lot 9, Block 3, NORTH PARK ADDITION TO CLEAR LAKE, according to the plat thereof recorded in Volume 4 of Plats, page 16, records of Skagit County, Washington.

Situated in Skagit County, 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	

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>Kirsty Lowery</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>290108</u>
SIGNATURE <u>Kirsty Lowery</u>	DATE <u>10/10/00</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 has a policy of providing equal access to its services. If you need special accommodations, please contact us at 1-800-541-5200.



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Skagit County Auditor