



200101110130

Skagit County Auditor

1/11/2001 Page 1 of 2 2:05:20PM

RETURN ADDRESS

LYNNWOOD ESCROW CORPORATION
P.O. BOX 5857
Lynnwood, WA. 98046
ESC. # 200831



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

FIRST AMERICAN TITLE CO.

TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN) 63044
1999 SILVERCREST 56X 28 17711127

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER 4463-000-018-0010(R82964)

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS

NAME OF REGISTERED OWNER

Alvin R. Kriens

NAME OF ADDITIONAL REGISTERED OWNER

Phyllis R. Kriens

ADDRESS CITY STATE ZIP CODE
4535 Lois Lane Sedro Woolley WA. 87284

NAME OF LEGAL OWNER

Golf Savings Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE
P.O. Box 5010 Lynnwood WA. 98046

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

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Snohomish

Signed or attested before me on 1/9/01

by Alvin R. Kriens PRINT NAME OF REGISTERED OWNER

Signature NOTARY OR AGENT

by Phyllis R. Kriens PRINT NAME OF REGISTERED OWNER

Dee Gooby PRINTED NAME OF NOTARY

Title Notary DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR 1-11-02 Dealer No. OR 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 # 360-9410 BLDG PERMIT # 980216
TAWNIE BOSMAN SKAGIT COUNTY PERMIT CENTER

SIGNATURE / POSITION DATE
Tawnie Bosman Skagit County Permit Center 01/10/01

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 Carol M. Warren, Sr. V.P.

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Snohomish</u>	Signed or attested before me on <u>1-5-01</u>
	by <u>Golf Savings Bank</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by <u>Carol M. Warren, Sr. V.P.</u> PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>Dee Gooby</u>
Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR <u>1-1102</u> Dealer No. OR _____ Notary Expiration Date _____	

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

Lot 18 "PLAT OF PRAIRIE ESTATES", as per plat recorded in Volume 13 of Plats, at pages 84 and 85, in the records of Skagit County, 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) <u>Midway Homes</u>	WA DEALER NUMBER <u>4161</u>	DATE OF SALE <u>11-15-00</u>
PURCHASE PRICE <u>749,900 -</u>	TAX JURISDICTION/TAX RATE <u>W.8</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>
<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>CRYSTAL R. BURRESS</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-10</u>
SIGNATURE <u>[Signature]</u>	DATE <u>1-11-01</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 accommo

