RETURN ADDRESS			The second secon		2001021 Skagit County	4000
Skagit State	Bank	to the section (AA) wate		2/14/20	שמיים שמו	Auditor
PP.20. Box 285	:			Andrew State of the Control of the C	of Page 1 of	2 3:36:58PM
Burbington_l	NA 98233					0. 14
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от в 1 & 2	носк. 1	PLAT NAME Cape Ho	on the Skagi		SECTION/TOWN	SHIP/HANGE
GRANTOR(S) RI	EGISTERED/LE	GALOWNER(S) ADDI	TIONAL NAM	MES ON PAGE	
OUNTY NUMBER			DE REGISTERED OWNER		NUMBER OF LEGAL OWN	
29 AME OF REGISTERED O	WNER		, 1		1	
Harold W Vande	erPol	i				· •
AME OF ADDITIONAL RE	GISTERED OWNER					
629 Jameson St			city Sectro Woolley	,	STATE WA	ZIP CODE 98284
AME OF LEGAL OWNER	<u> </u>		Sear WOOTHE		VVA	30204
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P:0. Box 285	•		Burlington,		· WA	98233
GRANTEE IN INC.	·					
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Signature	INFORMATION	ris Accurate	APPLICABLE	EAMVARETI	HE REGISTERED OV	VNER(S) OF THIS
Signature of Addition						
NOTARY SEAL OF	EXOL SID	NOTARIZA lo of Washingtor		1	ISTERED OWNER(S	SIGNATURE
COMMISSION OTA		County of			Signed or allested before me on	1-12-01
	li de l	Havold PRINT NAME OF RE	W Vander P	O Sign	DALUTE NOTARY OR AGEN	asndy
PUB PAR 2-1-2	2001			•		sidy
OFW		PRINT NAME OF RE	GISTERED OWNER	PRIN	TED NAME OF NOTARY	Landard Control
37 N	Tille		TION/AGENT/NOTARY		County/Office 1	NoOR
TITLECOMPAN			HONOGENTHOTAT		Notary Expirati	on Date 2-01-200
			orship is true and corr	ect per the rea	al property records.	
IAME (TYPED OR PRINTI	ED)		TITE	E COMPANY / PI	HONE NUMBER	
IGNATURE / POSITION		•		· · · · · · · · · · · · · · · · · · ·		DATE
inalize this applica	ition with a Line	nsing Agent w	ithin 10 calendar da	vs of the date	Title Company Repr	'asoniativo elane
BUILDING PERI				,	The Company Nobi	
	M the manufac	lured home has	been allixed to the re sued for this purpose		described. Iment will be Inspected	dupon completion.
NAME (TYPED OR PRINT	<i>T</i>	8	LDG PERMIT OFFICE/PHO COUNTY PERMIT CE	NE #	BLOG PERA	
GIGNATURE APOSITION	00000	4/5	Mt Servin	M.	chaining	DATE
0-420-729 MANUF HOME	APPL (IVOLUDIOR P	1 JUA	JULY SCIVI	x 2 4	unician	10401

60.	1220	ii) i	1 60 -	140	3.

A SIGNATURE OF LEG	AL OWNER		•		
SIGNATURE OF LEG	#				
SIGNATURE OF LEGAL	OWNER INDICA	TES CONSENT FOR	ELIMINATION	LOF TIT LE / REMOVAL	FROM REAL PROPERTY.
Signature of Le	agal Owner and Titl	e, IF APPLICABLE	<u> </u>	20 Cassidi	L-AVP
Signature of Additional Le	egal Owner and Till	e, if applicable	skacit stati	E BANK BURLINGTON	WASH. 98233
NOTARY SEAL OR STAM	P	NOTARIZATION/C	ERTIFICATIO	N FOR LEGAL OWNER(S) SIGNATURE
QHUISSION E NOTADI		ashington County of	(A61T	Signed or atteste before me c	
NOTARY	PAINT N	Kagij Sta IAME OF LEGAL OWNER	te Bank	Signature NOTARY OR	AGENT Meller
PUBLIC 11-15-2004	DA PRINT N	IAME OF LEGAL OWNER		PRINTED NAME OF NOT	
OF WASH	Tille	ISHIP POSITION/AGENTA	OYARY .	AND: C	Ollice No. OR 1752004
Z LAND DESCRIPTION	V (A legal descrip	3.00		rom the local County As	xpiration Date
			Do Obtained to	on the local County As	sossor's Office
thereof, the So and 100 feet So TOGETHER WITH a	outhwesterly li outhwesterly of a non-exclusive er the Southwes	ine of said Nort f the Northeaste e easement for i	heasterly 10 rly line of ngress, egn	y; EXCEPT the North 00 feet being measu said Lots 1 and 2; ess and building se westerly 150 feet o	red parallel with tback purposes over,
	•	lusive 10 foot w	ide easemen	t for waterline pur	poses centered upon
the existing was dealer's REPORT	sterline which COFSALE alor	runs approximat or the original	<u>elv across :</u> line betwee	said excepted North n said Lots 1 and 2	poses centered upon leasterly 100 feet
I CERTIFY THAT THIS	SINFORMATIONI	S CORRECT. THE V	EHICLE IS CLI	EAR OF ENCUMBRANC	ES EXCEPT AS SHOWN.
ANY REQUIRED SAL	<u>.es tax has bee</u>	EN COLLECTED.		2500	
				WA DEALER NUMBER	DATE OF SALE
PURCHASE PRICE	TAX JURISDICTION	ITAX RATE DEALER'S	AUTHORIZED SIGI	NATURE .	
USE TAX EXE	MPT Sale to a Cert	lilied Tribal member o	n the reservatio	n (attach notarized stater	nent of delivery).
9 COUNTY AUDITOR/	AGENT LICENSIN	NG OFFICE APPRO	VAL: (Not for t	use by Subagents)	
I certify that the above app the recording of this form.	lication appears to t	nave been completed	correctly, and th	e applicant has sufficient o	documentation to proceed with
NAME TYPED OR PRINTED	11			COUNTY OFFICENES OPEN	ATOR NUMBER
SIGNATURE	1e, V	11112		090	1-01
Nav	iele	Delle	Ø		14/0/
10 TITLE FEES				•	
FILING FEE AP	PPLICATION	MOBILE HOME FEE	ELIMINATION	FEE USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
IMPORTANT:	Licensing Offic Retain proof of	e, take your applic the recording fee	cation form to s paid. If the	ne County Auditor / Vo the County Recordin Recording Office retail d copy of the recorde	g Office. ins
APPLIC	Manuí	recorded, you mus actured Home App ing subagents cha	plication, payi	Vehicle Licensing officing all required fees. \	e to file the /ehicle
For full inst or Transfer	ructions on com in Location, sec	pleting this form form form TD-420-730	or Title Elimina	ation, Removal from F ed Home Application	Real Property

The Department of Licensing has a policy of providing equal access to its services.

If you need special accommodation and the service of providing equal access to its services.

TD-420-729 MANUF HOME APPL (R/8/98)OR Page 2 of 2

200102140091 , Skagit County Auditor