

RETURN ADDRESS

LYNNWOOD ESCROW CORPORATION

P.O. BOX 5857

LYNNWOOD, WA. 98046

ESC. 200054



200102220009

, Skagit County Auditor

2/22/2001 Page 1 of 2 9:36:20AM

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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)				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME		FIRST AMERICAN TITLE CO.			
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2000	SKYLINE	52 X 28	2191-0692-M	
2 LAND		LEGAL DESCRIPTION ON PAGE _____			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER	
				350715-4-001-02-4	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
				15-35-7 NW-SE	
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					
DEBORAH K. EWING					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS		CITY		STATE	ZIP CODE
39513 Cape Horn Rd.		Concrete		WA.	98237
NAME OF LEGAL OWNER					
GREENPOINT CREDIT LLC					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY		STATE	ZIP CODE
12250 Kirkham Road		Poway		CA.	92064
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 OF STATE OF WASHINGTON DEE GOOBY COUNTY OF SNOHOMISH EXPIRES 11-11-02		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Snohomish		Signed or attested before me on 3-3-01	
		by Deborah K. Ewing PRINT NAME OF REGISTERED OWNER		Signature NOTARY OR AGENT	
		by _____ PRINT NAME OF REGISTERED OWNER		Dee Gooby PRINTED NAME OF NOTARY	
		Title Notary DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 1-11-02 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: <input type="checkbox"/> the manufactured home has been affixed to the real property as described. <input checked="" 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 # 336 9410		BLDG PERMIT #	
TAMARIE BOSMAN		SKAGIT COUNTY PERMIT CENTER		0000-0053	
SIGNATURE / POSITION		DATE			
		Support Services		02/20/01	

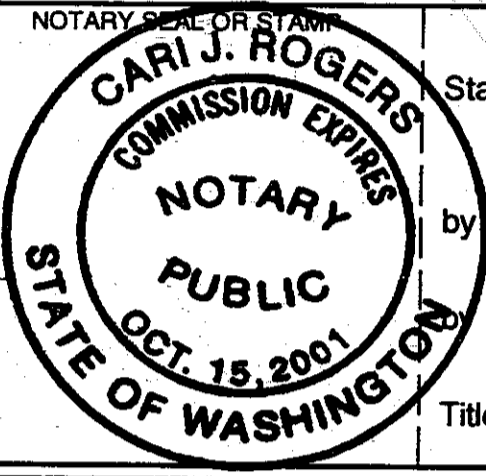
6 SIGNATURE OF LEGAL OWNER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Betty A. Labot **GreenPoint Credit LLC**

Signature of Additional Legal Owner and Title, IF APPLICABLE

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington
County of *Clark*Signed or attested
before me on *3-9-00*

by

*GreenPoint Credit LLC*Signature *Cari J. Rogers*

PRINT NAME OF LEGAL OWNER

NOTARY OR AGENT

GreenPoint Credit LLC

PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title

Notary

AND:

County/Office No. OR
Dealer No. OR*10-15-01*

Notary Expiration Date

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

Tract 3 of Skagit County Skagit Short Plat No. 93-048, approved October 20, 1993 and recorded October 21, 1993 under Auditor's File No. 93102100851 in Vol. 11 of Short Plats, page 5, records of Skagit County, Washington; being a portion of the Northwest 1/4 of the Southeast 1/4 of Section 15, Township 35 North, Range 7 East, W.M.

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)

COACH CORRAL INC

WA DEALER NUMBER

4278

DATE OF SALE

3-10-00

PURCHASE PRICE

48825-

TAX JURISDICTION/TAX RATE

7.8

DEALER'S AUTHORIZED SIGNATURE

Linda Milbourn

☐ **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)

Harrie Willis

COUNTY OFFICE/YES OPERATOR NUMBER

2901-21

SIGNATURE

*Harrie Willis**2901-21*

DATE

*2/22/01***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 accommodation



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