

RETURN ADDRESS

Mr. and Mrs. David W. Montoure

5918 Ershig Road

Bow, WA 98232

P-85366-E

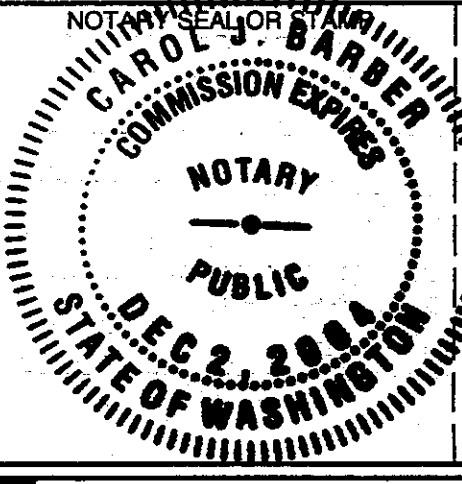


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, Skagit County Auditor

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STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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)	
	1998	GoldenWes	27 X 66	GWOR23N20957	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 360335-4-013-0300/P109073	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
				35-36-3	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		2		1	
NAME OF REGISTERED OWNER David W. Montoure					
NAME OF ADDITIONAL REGISTERED OWNER Susan L. Montoure					
ADDRESS		CITY		STATE	ZIP CODE
5918 Ershig Road		Bow		WA	98232
NAME OF LEGAL OWNER Peoples Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY		STATE	ZIP CODE
4183 Meridian Street, 2nd Floor		Bellingham		WA	98226
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		Signed or attested	
		County of Skagit		before me on 11-2-00	
		by David W. Montoure		Signature	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Susan L. Montoure		Jennifer J. Lind	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title Notary		AND: County/Office No. OR		Dealer No. OR 10/01/02	
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: <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 #	
TANNEE BOSMAN		SKAGIT COUNTY PERMIT CENTER		98-0454	
SIGNATURE / POSITION		DATE			
		Support Services		01/30/01	

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 <u>Jill R. Olson for Peoples Bank</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
State of Washington		County of <u>WHATCOM</u>		Signed or attested before me on <u>2-5-01</u>	
JILL R OLSON for		Signature <u>Carol J Barber</u>		NOTARY OR AGENT	
PRINT NAME OF LEGAL OWNER		PEOPLES BANK		PRINTED NAME OF NOTARY	
PRINT NAME OF LEGAL OWNER		Title <u>NOTARY</u>		County/Office No. OR	
DEALERSHIP POSITION/AGENT/NOTARY		AND: Dealer No. OR		Notary Expiration Date <u>2-2-04</u>	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
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>Vic Cox Home Center</u>			WA DEALER NUMBER <u>4427</u>		DATE OF SALE <u>7-10-98</u>
PURCHASE PRICE <u>63,282.00</u>		TAX JURISDICTION/TAX RATE <u>3110 8.2</u>		DEALER'S AUTHORIZED SIGNATURE <u>Karen Furber</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>PEGGY A. RIEDEL</u>			COUNTY OFFICE/VES OPERATOR NUMBER <u>29-01-04</u>		
SIGNATURE <u>Peggy A. Riedel</u>			DATE <u>2/28/01</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 services, call TDD (206) 664-8885.

