**RETURN ADDRESS** Mr. and Mrs. David C. Sherman , Skagit County Auditor 7695 Medford Road 3:50:25PM 1 of 3 4/20/2001 Page 98284 Sedro-Woolley, WA P-95440-E PLEASE CHECK ONE STATE OF WASHINGTON
Department of **MANUFACTURED HOME EXTITLE ELIMINATION APPLICATION** ☐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) MANUFACTURED HOME LENGTH/WIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN) MAKE TPO / PLATE NUMBER YEAR 1999 Goldenwest GWOR23N22609 56 **X** 27 **LEGAL DESCRIPTION ON PAGE** 2 LAND REAL PROPERTY TAX PARCEL NUMBER MANUFACTURED HOME WILL BE AFFIXED REMOVED 3947-000-006-0301/P6727 LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE 6 Livermores Hamilton Acreage **ADDITIONAL NAMES ON PAGE** 3 'GRANTOR(S) REGISTERED/LEGAL OWNER(S) COUNTY NUMBER NUMBER OF LEGAL OWNERS NUMBER OF REGISTERED OWNERS 2 NAME OF REGISTERED OWNER David C. Sherman NAME OF ADDITIONAL REGISTERED OWNER Donna J. Sherman ADDRESS ZIP CODE STATE 7695 Medford Road 98284 Sedro-Woolley, WA NAME OF LEGAL OWNER Oakwood Acceptance Corporation NAME OF ADDITIONAL LEGAL OWNER ZIP CODE STATE ADDRESS CITY 2222 S. Dobson Road #304 85202 ÁΖ Mēsa, **GRANTEE** NAME 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 Signed or attested 7 State of Washington Skagit before me on County of by David C. Sherman NOTARY Signature PRINT NAME OF REGISTERED OWNER Donna J. Sherman PRINT NAME OF REGISTERED OWNER County/Office No. OR Notary Dealer No. OR\_ AND: OF WASH Notary Expiration Date DEALERSHIP POSITION/AGENT/NOTARY TITLE COMPANY CERTIFICATION T certify that the legal description of the land and ownership is true and correct per the real property records. TITLE COMPANY / PHONE NUMBER NAME (TYPED OR PRINTED) DATE SIGNATURE / POSITION Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs. **BUILDING PERMIT OFFICE CERTIFICATION**  $\hfill \square$  the manufactured home has been affixed to the real property as described. I certify that: a building permit has been issued for this purpose and the attachment will be inspected upon completion. **BLDG PERMIT #** NAME (TYPED OR PRINTED) BLDG PERMIT OFFICE/PHONE # 336-9410

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Support Services

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The Department of Licensing has If you need special accommodal

or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.

200104200116 , Skagit County Auditor

## Exhibit A

## DESCRIPTION:

That portion of Lot 6, "LIVERMORES HAMILTON ACREAGE", as per plat recorded in Volume 3 of Plats, page 87, records of Skagit County, Washington, described as follows:

Beginning at the Southwest corner of said lot; thence North along the County road 68 feet; thence East 151 feet; thence South 68 feet to the South line of said lot; thence West along the South line of said lot to the point of beginning.

TOGETHER WITH water line easement recorded under Auditor's File No. 712417.

Situate in the County of Skagit, State of Washington.

