

RETURN ADDRESS

Michael L. Lewis

506 Main

Mount Vernon, WA 98273



200105100114

, Skagit County Auditor

5/10/2001 Page 1 of 3 2:54:20PM

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)	
\$49016	72	STATL	60 X 24	2249	
2 LAND LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 350808-0-005-0016	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE 8/35/8	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER Skagit		NUMBER OF REGISTERED OWNERS 3		NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER Challenger Ridge Properties LLC: Paul Rosasco					
NAME OF ADDITIONAL REGISTERED OWNER Louis Dailly					
ADDRESS 12529 Patricia Lane		CITY Burlington		STATE WA	ZIP CODE 98233
NAME OF LEGAL OWNER People's Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS 1801 Riverside Drive		CITY Mount Vernon		STATE WA	ZIP CODE 98273
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					
		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Skagit		Signed or attested before me on 5/8/01	
		by Paul Rosasco PRINT NAME OF REGISTERED OWNER		Signature NOTARY OR AGENT	
		by Louis Dailly PRINT NAME OF REGISTERED OWNER		Lisa L. Riggles PRINTED NAME OF NOTARY	
		Title DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 10/1/01 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) TAMMIE BOSMAN		BLDG PERMIT OFFICE/PHONE # 336-9410 SKAGIT COUNTY PERMIT CENTER		BLDG PERMIT # 3334	
SIGNATURE / POSITION 		Support Services		DATE 05/09/01	

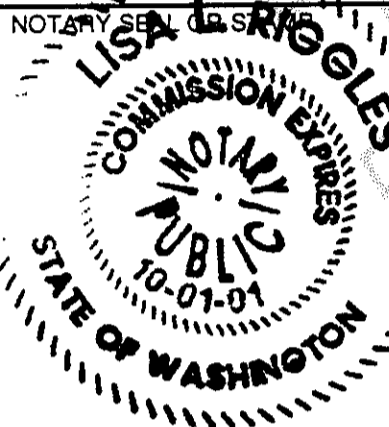
6 SIGNATURE OF LEGAL OWNER

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

Signature of Legal Owner and Title, IF APPLICABLE

PEOPLE'S BANK

Signature of Additional Legal Owner and Title, IF APPLICABLE

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**

State of Washington

County of Skagit

Signed or attested

before me on

5-8-01by James M. VanderMey, vp
PRINT NAME OF LEGAL OWNER

Signature

Lisa L. Riggles
NOTARY EXEMPTby
PRINT NAME OF LEGAL OWNERLisa L. Riggles
PRINTED NAME OF NOTARY

Title

DEALERSHIP POSITION/AGENT/NOTARY

AND:

County/Office No. OR

Dealer No. OR

Notary Expiration Date

10/1/01**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

Government Lot 4, Section 8, Township 35 North, Range 8 East, W.M., EXCEPT that portion conveyed to the Seattle and Northern Railway Company by deed recorded March 24, 1919, in Volume 41 of Deeds, page 19; ALSO EXCEPT that portion conveyed to the State of Washington by deed recorded October 28, 1949, under Auditor's File No. 437453; ALSO EXCEPT that portion lying within the as-built and existing right-of-way for Challenger Road; ALSO EXCEPT that portion, if any, conveyed to Simpson Properties by deed recorded November 29, 1976, under Auditor's File No. 846581; TOGETHER WITH that portion, if any, of Government Lot 5, Section 8, Township 35 North, Range 8 East, W.M., conveyed in instrument recorded November 29, 1976, under Auditor's File No. 846582. Situate in the County of Skagit, 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)

WA DEALER NUMBER

DATE OF SALE

PURCHASE PRICE

TAX JURISDICTION/TAX RATE

DEALER'S AUTHORIZED SIGNATURE

☐ **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)

COUNTY OFFICE VES OPERATOR NUMBER

SIGNATURE

DATE

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 accommod



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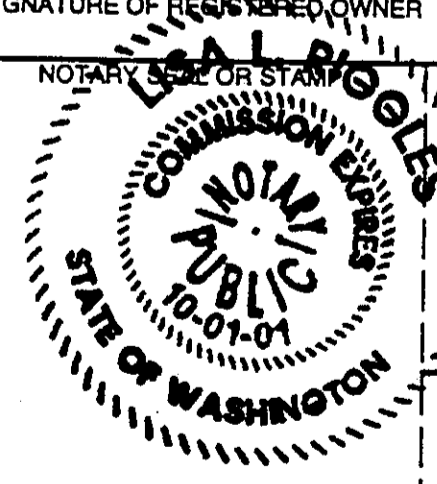
, Skagit County Auditor

OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK TYPE OF APPLICATION: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

PROPERTY TAX PARCEL NUMBER: 350808-0-005-0016

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER Stephen A. Olsen	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:	
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF REGISTERED OWNER X. <i>Stephen A. Olsen</i>	DATE 5-8-01
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
NOTARY SEAL OR STAMP 	State of Washington County of Skagit Signed or attested before me on 5/8/01 Signature <i>Lisa L. Riggles</i> Printed Name of Applicant Stephen A. Olsen Title Dealer No. OR AND: County/Office No. OR 10/1/01 Notary Expiration Date

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