

RETURN ADDRESS



200107190003

Skagit County Auditor

7/19/2001 Page 1 of 2 8:52:32AM

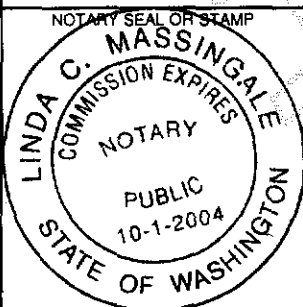
		<b>MANUFACTURED HOME APPLICATION</b>		<b>PLEASE CHECK ONE</b> <input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)					
<b>1 MANUFACTURED HOME</b>					
PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
782263	84	Kent	56 X 24	KW11029	
<b>2 LAND</b>					
LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER P100300					
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
			23-35-04		
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
29		1		1	
NAME OF REGISTERED OWNER					
Dale L Klinger					
NAME OF ADDITIONAL REGISTERED OWNER					
715 F and S Grade Rd					
ADDRESS		CITY	STATE	ZIP CODE	
Sedro Woolley		WA		98284	
NAME OF LEGAL OWNER					
Whidbey Island Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
PO Box 1589		Oak Harbor	WA	98277	
<b>GRANTEE</b>					
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 <i>x Dale L Klinger</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>			
		State of Washington County of Skagit Signed or attested before me on 7/2/01 by Dale L. Klinger PRINT NAME OF REGISTERED OWNER Signature <i>Whidbey Island Bank</i> NOTARY OR AGENT by _____ PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY Title _____ AND: _____ DEALERSHIP POSITION/AGENT/NOTARY County/Office No. OR 290108 Dealer No. OR Notary Expiration Date			
<b>4 TITLE COMPANY CERTIFICATION</b>					
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.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that: <input type="checkbox"/> the manufactured home has been affixed to the real property as described. <input 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 #		BLOG PERMIT #	
April McCombs		360-855-0771		6605	
SIGNATURE / POSITION		BUILDING OFFICIAL		DATE	
<i>April McCombs</i>				7/6/01	

**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 Des X Malle VP.

Signature of Additional Legal Owner and Title, IF APPLICABLE \_\_\_\_\_

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington  
County of SkagitSigned or attested  
before me on 7-16-01by WHIDBEY ISLAND BANK  
PRINT NAME OF LEGAL OWNERSignature Linda C Massingale  
NOTARY OR AGENTby \_\_\_\_\_  
PRINT NAME OF LEGAL OWNERPrinted Name of Notary  
Linda C MassingaleTitle \_\_\_\_\_  
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR  
Dealer No. OR 10-1-04  
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**Lot 4 S/P 2-91 AF # 9201270051 Being pt  
NE 1/4 inc m/H KW 11009 P 100300**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) <u>Hurst, Lowery</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-0108</u>
SIGNATURE <u>Hurst Lowery</u>	DATE <u>7/19/01</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 accommodation, please call (360) 902-3600.200107190003  
Skagit County Auditor