

RETURN ADDRESS

Whidbey Island Bank

PO Box 619

Sedro Woolley Wa 98284



200109130007

Skagit County Auditor

9/13/2001 Page 1 of 2 9:41:12AM

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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER %36059	YEAR 1971	MAKE FOURS	LENGTH/WIDTH(FEET) 52 X 24	VEHICLE IDENTIFICATION NUMBER (VIN) 0W1528	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED				REAL PROPERTY TAX PARCEL NUMBER 3867-000-003-0805	
LOT 3	BLOCK	PLAT NAME Burlington Acreage Property		SECTION/TOWNSHIP/RANGE	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER 29	NUMBER OF REGISTERED OWNERS 2		NUMBER OF LEGAL OWNERS 1		
NAME OF REGISTERED OWNER Gray, Henry J.					
NAME OF ADDITIONAL REGISTERED OWNER Gray, Peggy A					
ADDRESS 20751 W Jordan Rd		CITY Burlington	STATE Wa	ZIP CODE 98233	
NAME OF LEGAL OWNER Whidbey Island Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS PO Box 1589		CITY Oak Harbor	STATE Wa	ZIP CODE 98277	
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 <u>Henry J. Gray</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Peggy A. Gray</u>					
		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of <u>Skagit</u> Signed or attested before me on <u>9-12-01</u> <u>Henry J. Gray</u> Signature <u>Linda C. Massingale</u> PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT <u>Peggy A. Gray</u> <u>Linda C. Massingale</u> PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY Title <u>Notary</u> AND: County/Office No. OR Dealer No. OR Notary Expiration Date DEALERSHIP POSITION/AGENT/NOTARY 10-1-04			
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: ☐ the manufactured home has been affixed to the real property as described.					
☒ a building permit has been issued for this purpose and the attachment will be inspected upon completion.					
NAME (TYPED OR PRINTED) Cindy Gauthier		BLDG PERMIT OFFICE/PHONE # 336-9410		BLDG PERMIT # 13745	
SIGNATURE / POSITION <u>Cindy Gauthier</u>		SKAGIT COUNTY PERMIT CENTER		DATE 9-13-2001	

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

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

Signed or attested before me on 9-12-01

Signature of Notary Public Linda C. Massingale

PRINTED NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

AND: County/Office No. OR Dealer No. OR Notary Expiration Date 10-1-04

DEALERSHIP POSITION/AGENT/NOTARY

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

TRACT 4 OF SHORT PLAT NO. 8-81, APPROVED SEPT 10, 1981, AND RECORDED SEPT 11, 1981, UNDER AUDITOR'S FILE NO. 8109110009 IN BOOK 5 OF SHORT PLATS, PAGE 126, RECORDS OF SKAGIT COUNTY WASHINGTON; BEING A PORTION OF TRACT 3 OF THE "PLAT OF THE BURLINGTON ACREAGE PROPERTY", AS PER PLAT RECORDED IN VOL 1 OF PLATS, PAGE 49, RECORDS OF SKAGIT COUNTY, WASHINGTON. 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

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.

COUNTY OFFICER'S OPERATOR NUMBER

DATE 9/13/01

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, please

TD-420-729 MANUF HOME APPL (R/9/98) OR Page 2 of 2

9/13/2001 Page 2 of 2

Skagit County Auditor

200109130007

9:41:12AM