

RETURN ADDRESS

Island Title Company
P. O. Box 670
Burlington, WA 98233

200110220134
Skagit County Auditor

10/22/2001 Page 1 of 3 12:16:07PM

MANUFACTURED HOME APPLICATION					PLEASE CHECK ONE
LICENSING STATE OF WASHINGTON Department of Licensing 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 2001 MAKE LIBERTY LENGTH/WIDTH(FEET) X VEHICLE IDENTIFICATION NUMBER (VIN) 09L34255XT					
2 LAND MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED LOT 2 BLOCK PLAT NAME Short Plat No. 97-0006 REAL PROPERTY TAX PARCEL NUMBER 3504011200610108 TOWNSHIP/RANGE 35-4					
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE COUNTY NUMBER 2 NUMBER OF REGISTERED OWNERS 1 NUMBER OF LEGAL OWNERS 1					
NAME OF REGISTERED OWNER TAXDAHL, ALLEN G.					
NAME OF ADDITIONAL REGISTERED OWNER TAXDAHL, KIMBERLEY D.					
ADDRESS		CITY	STATE	ZIP CODE	
6150 GARTIN PLACE		SEDRO WOOLLEY	WA	98284	
NAME OF LEGAL OWNER WASHINGTON MUTUAL BANK					
NAME OF ADDITIONAL LEGAL OWNER 					
ADDRESS		CITY	STATE	ZIP CODE	
1102 PACIFIC AVE., 2ND FLOOR, TACOMA			WA	98402	
GRANTEE NAME <i>Kimberley D. Taxdahl</i>					
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: <i>Allen G. Taxdahl</i> <i>Kimberley D. Taxdahl</i>					
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 County of SKagit Signed or attested before me on 2/28/2001 by Allen G. Taxdahl Signature Marcia J. Jennings PRINT NAME OF REGISTERED OWNER by Kimberley D. Taxdahl PRINTED NAME OF NOTARY PRINT NAME OF REGISTERED OWNER Title Notary Public County/Office No. OR DEALERSHIP POSITION/AGENT/NOTARY AND: Dealer No. OR Notary Expiration Date 05/2004					
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) NAME TITLE COMPANY / PHONE NUMBER SIGNATURE / POSITION NAME 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 checked="" 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) PAULINE SOSMAN SKAGIT COUNTY PERMIT CENTER BLDG PERMIT OFFICE/PHONE # 360-9417 BLDG PERMIT # BPO-0113 SIGNATURE / POSITION Pauline Sosman DATE 10/05/01					

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

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
County of

Pierce

Signed or attested
before me on

3/1/01

Notary Public
State of Washington
VICKI J. BUELL

My Appointment Expires Jan 12, 2005

by Washington Mutual

PRINT NAME OF LEGAL OWNER

Signature Vicki J. Buell

NOTARY OR AGENT

PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title DEALERSHIP POSITION/AGENT/NOTARY

County/Office No. OR
AND: Dealer No. OR
Notary Expiration Date

1/12/05

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

LOT 2, SKAGIT COUNTY SHORT PLAT NO. 97-0006; BEING A PORTION OF GOVERNMENT LOT 3, NW, SECTION 1, TOWNSHIP 35 NORTH, RANGE 4 EAST OF THE WILLAMETTE MERIDIAN, AS MORE FULLY DESCRIBED IN THE ATTACHEMENT PAGE 1.

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
VALLEY HOME CENTER	4117	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE
\$94,900.00	7.8%	<i>Jan Jule</i>

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/VFS OPERATOR NUMBER
Peggy A. Biedell-Graham	29-01-04
SIGNATURE	DATE
<i>Peggy A. Biedell-Graham</i>	10/22/01

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
If you need special accommodations

TD-420-729 MANUF HOME APPL (R/8/98)OR Page 2 of 2

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MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT
LEGAL DESCRIPTION OF LAND

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. 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

Land: Property Tax Parcel Number 350401-2-006-0108

Legal Description:

EXHIBIT "A"

PARCEL A:

Lot 2, SKAGIT COUNTY SHORT PLAT NO. 97-0006, approved January 24, 2001, and recorded January 24, 2001, under Auditor's File No. 200101240052, records of Skagit County, Washington; being a portion of Government Lot 3 in Section 1, Township 35 North, Range 4 East of the Willamette Meridian.

PARCEL B:

An easement for ingress and egress over the South 40 feet of Government Lot 2 and the South 40 feet of the East Half of the East Half of Government Lot 3, all in Section 1, Township 35 North, Range 4 East of the Willamette Meridian.

ALL situated in Skagit County, Washington.

- END OF EXHIBIT "A" -



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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:

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)																									
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER																								
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*The Department of Licensing has a policy of providing equal access to its services.
If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.*