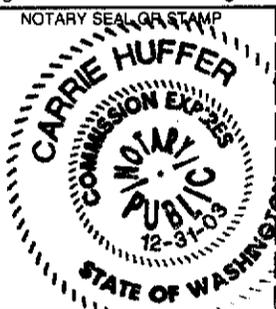
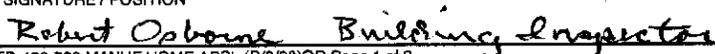


RETURN ADDRESS

Wells Fargo Home Mortgage
 1509A Riverside Drive
 Mount Vernon, WA 98273
 Escrow #04-00423-01


 200111080108
 Skagit County Auditor
 11/8/2001 Page 1 of 2 3:53:21PM

		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) 06751					
1 MANUFACTURED HOME			FIRST AMERICAN TITLE CO.		
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
&66689	89	OAKSP	52X 48/28	32910138YAB	
2 LAND		LEGAL DESCRIPTION ON PAGE _____			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 3771-000-025-0002	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
25		WIDNOR DRIVE			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)			ADDITIONAL NAMES ON PAGE _____		
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		1		1	
NAME OF REGISTERED OWNER					
WILLOW, TERESA R.					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS					
417 WIDNOR AVENUE		MOUNT VERNON		STATE	ZIP CODE
				WA	98274
NAME OF LEGAL OWNER					
WELLS FARGO HOME MORTGAGE, INC.					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
1509A RIVERSIDE DRIVE		MOUNT VERNON		STATE	ZIP CODE
				WA	98273
GRANTEE NAME DENNIS RIEGER					
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 _____					
NOTARY SEAL OR STAMP 		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of <u>Skagit</u> Signed or attested before me on <u>11/01/01</u> by <u>Teresa R. Willow</u> Signature  PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT by <u>n/a</u> PRINT NAME OF REGISTERED OWNER Title <u>Notary Public</u> AND: County/Office No. OR Dealer No. OR 12/31/03 DEALERSHIP POSITION/AGENT/NOTARY 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: <ul style="list-style-type: none"> <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 #		BLDG PERMIT #	
ROBERT OSBORNE				5811	
SIGNATURE / POSITION				DATE	
		Building Inspector		11-8-01	

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 Margaret Adams Cj Brand Mgr

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>11/01/01</u>
	by <u>Wells Fargo Home Mortgage</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	<u>Carrie Huffer</u> PRINTED NAME OF NOTARY
Title <u>Notary Public</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR <u>12/31/03</u> Notary Expiration Date	

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

Lot 25, "WIDNOR DRIVE", as per plat recorded in Volume 9 of Plats, page 104, records of Skagit County, 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) <u>PEGGY A. RIEDELL-GRAHAM</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-04</u>
SIGNATURE <u>[Signature]</u>	DATE <u>11/8/01</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
If you need special accommodat



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