

RETURN ADDRESS

Mr. & Mrs. John Cassidy

3665 Woodcrest Lane

Sedro-Woolley, WA 98284



200111160021

, Skagit County Auditor

11/16/2001 Page 1 of 2 9:03:15AM

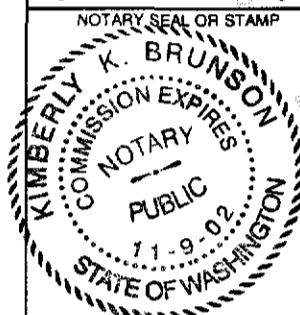
P-98676E

LAND TITLE COMPANY OF SKAGIT COUNTY

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)				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2002	RIDGEDALE	70 X 28	118-28535A/B	
2 LAND					
LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 4687-000-001-0000/P110928					
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
A		Parsons Creek Acres			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER John D. Cassidy					
NAME OF ADDITIONAL REGISTERED OWNER Patricia A. Cassidy					
ADDRESS		CITY	STATE	ZIP CODE	
3665 Woodcrest Lane		Sedro-Woolley	WA	98284	
NAME OF LEGAL OWNER America's Wholesale Lender					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
4500 Park Granada		Calabasas	CA	91302-1613	
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>John D. Cassidy</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Patricia A. Cassidy</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of Skagit		before me on 11-6-01	
		by John D. Cassidy		Signature <u>Nancy Lea Cleave</u>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Patricia A. Cassidy		PRINTED NAME OF NOTARY	
PRINT NAME OF REGISTERED OWNER		County/Office No. OR		AND: Dealer No. OR	
Title Notary		9-1-02		Notary Expiration Date	
DEALERSHIP POSITION/AGENT/NOTARY					
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 checked="" 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 #	
TANNER, ADAM		336-9410		BP01-0531	
SIGNATURE / POSITION		DATE			
<u>Adam Tanner</u>		<u>Skagit County Permit Center</u>		<u>11/16/01</u>	

6 SIGNATURE OF LEGAL OWNERSIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.
Countrywide Home Loans, Inc.Signature of Legal Owner and Title, IF APPLICABLE By: John Leaf

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington
County of KingSigned or attested
before me on 11-14-01by John Leaf
PRINT NAME OF LEGAL OWNERSignature Kimberly K. Brunson
NOTARY OR AGENTby _____
PRINT NAME OF LEGAL OWNERPRINTED NAME OF NOTARY
KIMBERLY K. BRUNSONTitle Notary
DEALERSHIP POSITION / AGENT / NOTARYAND: County/Office No. OR 11/9/02
Dealer No. OR
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**Lot A, "PLAT OF PARSON CREEK ACRES", as per plat recorded in Volume
16 of Plats, pages 149 through 151, inclusive, records of Skagit County,
Washington.

Situate in the County of Skagit, State of Washington.

8 DEALER'S REPORT OF SALEI 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)

Midway Homes

WA DEALER NUMBER

4161

DATE OF SALE

11/1/01

PURCHASE PRICE

2280

TAX JURISDICTION/TAX RATE

7.9

DEALER'S AUTHORIZED SIGNATURE

General Manager☐ 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)

PEGGY A. RIEDELL-GRAHAM

COUNTY OFFICE/VS OPERATOR NUMBER

29-01-04

SIGNATURE

Peggy A. Riedell-Graham

DATE

11/16/01**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 Licensin
If you need special accomm200111160021
Skagit County Auditor