



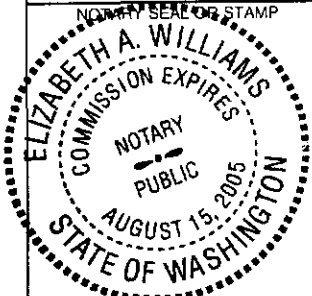
200111260239

, Skagit County Auditor

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RETURN ADDRESS

Carol L Van Leeuwen
16920 Allen West Rd
Bow wa 98232

STATE OF WASHINGTON Department of Licensing		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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER 8209252		YEAR 1989	MAKE SKYLE	LENGTH/WIDTH (FEET) 56X28	VEHICLE IDENTIFICATION NUMBER (VIN) 34910696Y
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY NUMBER P34337	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE 14 35 3	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS 1		NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER Carol L Van Leeuwen					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS 16920 Allen West Rd		CITY Bow	STATE wa	ZIP CODE 98232	
NAME OF LEGAL OWNER Carol L Van Leeuwen					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS 16920 Allen West Rd		CITY Bow	STATE wa	ZIP CODE 98232	
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>Carol L Van Leeuwen</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE _____					
		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <u>Skagit</u>		Signed or attested before me on <u>November 26, 2001</u>	
		by <u>Carol L. Vanleeuwen</u> PRINT NAME OF REGISTERED OWNER		Signature <u>Elizabeth A. Williams</u> NOTARY OR AGENT	
		by _____ PRINT NAME OF REGISTERED OWNER		ELIZABETH A. WILLIAMS PRINTED NAME OF NOTARY	
		Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. <u>OR</u> Dealer No. <u>OR8-15-05</u> 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: <input 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) <u>TISH CAMPBELL</u>		BLDG PERMIT OFFICE/PHONE # <u>SKAGIT COUNTY PERMIT CENTER 602-336-9410</u>		BLDG PERMIT # <u>BPO1-0636</u>	
SIGNATURE / POSITION <u>Tish Campbell, Support Services Tech</u>				DATE <u>11/26/01</u>	

6 SIGNATURE OF LEGAL OWNER

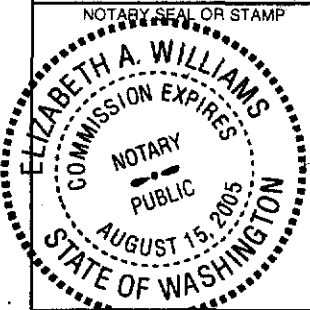
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Carol L VanLeeuwen

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*Skagit*Signed or attested
before me on*November 26, 2001*by *Carol L. VanLeeuwen*
PRINT NAME OF LEGAL OWNERSignature *Elizabeth A. Williams*
NOTARY OR AGENT**ELIZABETH A. WILLIAMS**by
PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title *Notary*
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR *8-15-05*
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)****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)

Rodrigo Angulo

COUNTY OFFICE/VFS OPERATOR NUMBER

2901-5

SIGNATURE

[Signature]

DATE

*11/26/01***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 accommodations

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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 P34268

Legal Description:

Legal Description: TAX 1 DK 25 DR 25; THE WEST 140 FEET OF A TRACT OF LAND IN THE SE1/4 SE1/4 OF SEC 14, TWP 35, RNG 3 DESCRIBED AS FOLLOWS; BEGINNING AT A POINT ON THE WEST RIGHT OF WAY LINE OF THE PACIFIC NORTHWEST TRACTION COMPANY, AT A POINT 220 FEET NORTH OF THE SOUTH LINE OF SAID SE1/4 SE1/4; THENCE WEST TO A POINT 340 FEET WEST OF THE EAST LINE OF SAID SE1/4 SE1/4; THENCE NORTH TO THE SAMISH RIVER; THENCE EAS



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MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT
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: _____

Registered Owners Printed Name(s): _____

Washington Client "NUMBER" _____

Signature of Legal Owner indicates consent for elimination of title:

1.	_____
2.	_____
3.	_____
4.	_____
5.	_____
6.	_____
7.	_____
8.	_____

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 of up to \$5,000 and/or up to 10 years imprisonment (RCW 46.12.210). I do solemnly attest under penalty of perjury law that I/we are the registered owners of this vehicle and this information is accurate:

Registered Owners Signature(s): _____

Date _____

1. X	_____
2. X	_____
3. X	_____
4. X	_____
5. X	_____
6. X	_____
7. X	_____
8. X	_____

NOTARY OR LICENSE AGENT NO. _____	Subscribed to and Sworn to before me this _____ day of _____, 19____	COUNTY _____	COMMISSION EXPIRES _____	COUNTY _____	VOLUME _____	PAGE _____	DATE _____
X	_____	_____	_____	_____	_____	_____	_____