

RETURN ADDRESS

FIRST AMERICAN TITLE COMPANY

PO Box 1667

Mt. Vernon, WA 98273

01-63756



200112110083

Skagit County Auditor

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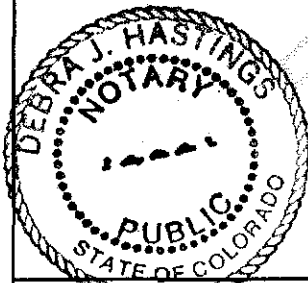
		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE <input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210) 63756					
1 MANUFACTURED HOME		FIRST AMERICAN TITLE CO.			
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	1994	Scion	13 X 60	16943431925	
2 LAND		LEGAL DESCRIPTION ON PAGE _____			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER	
				340518-4-001-0105 R30283	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
				18-34-5 NE-SE	
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		BLYMYM J 215 KD			
NAME OF ADDITIONAL REGISTERED OWNER		BLYMY L M 247 NH			
ADDRESS		CITY	STATE	ZIP CODE	
14552 Fawn Lane,		Mount Vernon, WA		98273	
NAME OF LEGAL OWNER		UBI Number			
ALLIANCE FUNDING, A DIVISION OF SUPERIOR BANK		36-1414142			
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
10375 E HARVARD AVE STE 200		Denver	CO	80231	
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>Marcus Blymyer</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Lisa Blymyer</u>					
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>1-30-01</u>	
		by <u>Marcus J. Blymyer</u>		Signature <u>Kim M. Kerr</u>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by <u>Lisa M. Blymyer</u>		<u>Kim M. Kerr</u>	
		PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY	
		Title <u>Clerk</u>		County/Office No. OR	
		DEALERSHIP POSITION/AGENT/NOTARY		Dealer No. OR <u>12151200</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			
<u>[Signature]</u>		<u>10-10-01</u>			
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)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
<u>TAMMIE JOHNSON</u>		<u>334-9410</u>		<u>94-1499</u>	
SIGNATURE / POSITION		DATE			
<u>[Signature]</u>		<u>10/08/01</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 AVPSignature of Additional Legal Owner and Title, IF APPLICABLE Alliance Funding

NOTARY SEAL OR STAMP

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Colorado
City of Denver County of DenverSigned or attested
before me on 10/12/01by Kent Hayes - AVP for
PRINT NAME OF LEGAL OWNERSignature [Signature]
NOTARY OR AGENTby Alliance Funding
PRINT NAME OF LEGAL OWNERPRINTED NAME OF NOTARY Debra J. HastingsTitle AVP
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR
Notary Expiration Date 10/22/04**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

Parcel A: Tr*2 of Surv rec in Vol 1 of Surv, pg 80, rec 8/30/74 under AFN 805588, rec of Skagit Co WA; being a ptn of E1/2 of NE1/4 and N1/2 of NE1/4 of SE1/4 S18, T34N, R5E, W.M.

Parcel B: A 60' rdwy & util easement as shown on face of the surv rec in Vol 1 of Surv, pg 80, rec 8/30/74, under AFN 805588, rec of Skagit Co WA & as granted in instrument rec 9/3/74, under AFN 805680, rec of Skagit Co, WA; EXCEPT any ptn within the main tract above described.

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)

COUNTY OFFICE/VFS OPERATOR NUMBER

SIGNATURE

DATE

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
or Transfer in Location, see form TD-420-7:200112110083
Skagit County AuditorThe Department
If you need spe

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ices.
64-8885.