

RETURN ADDRESS

Lynnwood Escrow Corp.

P.O. Box 5857

Lynnwood, WA. 98046

ESC. # 20011043



200202140009

Skagit County Auditor

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MANUFACTURED HOME APPLICATION

PLEASE CHECK ONE

- ☒ TITLE ELIMINATION
☐ TRANSFER IN LOCATION
☐ 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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	00	FLTWD	48 X 287	ORFLX4826703LP13

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
4130-001-004-0009 P# 74521

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
3 & 4	D	Town of Lyman	

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS

NAME OF REGISTERED OWNER

Lloyd M. Parker

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS	CITY	STATE	ZIP CODE
31435 W. 2nd St.	Lyman	Wa.	98263

NAME OF LEGAL OWNER

Golf Savings Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS	CITY	STATE	ZIP CODE
P.O. Box 5010	Lynnwood	WA.	98046

GRANTEE

NAME

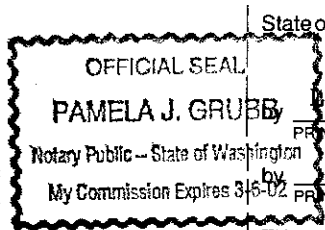
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE

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 SnohomishSigned or attested
before me on 9-10-01

OFFICIAL SEAL

PAMELA J. GRUBB

Notary Public - State of Washington
My Commission Expires 3-6-02

Lloyd M. Parker

PRINT NAME OF REGISTERED OWNER

Pamela J. Grubb

PRINT NAME OF REGISTERED OWNER

Notary

DEALERSHIP POSITION/AGENT/NOTARY

Signature
Pamela J. Grubb

NOTARY OR AGENT

Pamela J. Grubb

PRINTED NAME OF NOTARY

County/Office No. OR

AND: Dealer No. OR 3602

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: ☒ the manufactured home has been affixed to the real property as described.
☐ a building permit has been issued for this purpose and the attachment will be inspected upon completion.

NAME (TYPED OR PRINTED)

SKAGIT COUNTY PERMIT CENTER

BLDG PERMIT OFFICE/PHONE # 336-9410

BLDG PERMIT #

BP01-0547

SIGNATURE / POSITION

E. C. Schmitt

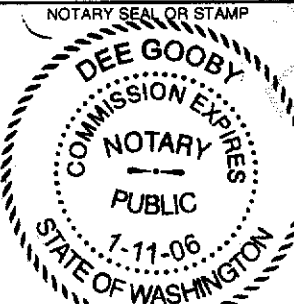
Supp Jac's Tech

DATE

2/13/02

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 M Warren, Sr. VP

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Snohomish</u>	Signed or attested before me on <u>2-1-02</u>
	by <u>Golf Savings Bank</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by <u>Carol M. Warren, Sr. VP</u> PRINT NAME OF LEGAL OWNER	<u>Dee Gooby</u> PRINTED NAME OF NOTARY
	Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR <u>1-11-06</u> Notary Expiration Date

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

Lot 3 and 4, Block D, "TOWN OF LYMAN", according to the Plat thereof recorded in Volume 1 of Plats, page 34, 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) <u>COACH CORRAL INC</u>		WA DEALER NUMBER <u>4278</u>	DATE OF SALE <u>9-14-01</u>
PURCHASE PRICE <u>45092-</u>	TAX JURISDICTION/TAX RATE <u>7.6</u>	DEALER'S AUTHORIZED SIGNATURE <u>Linda Milbourn</u>	
<input type="checkbox"/> 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>Rodrigo Angelo</u>	COUNTY OFFICE/VEH OPERATOR NUMBER <u>2901-0</u>
SIGNATURE <u>[Signature]</u>	DATE <u>02/14/02</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 a policy of providing equal access to its services.
If you need special accommodation, (

