

RETURN ADDRESS

Lynnwood Escrow Corp

P.O. Box 5857

Lynnwood, WA. 98046

ESC. # 20010960

LAND-TITLE COMPANY OF SKAGIT COUNTY



200202150008

Skagit County Auditor

2/15/2002 Page 1 of 2 8:54AM

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)
99 SKY 56 X 42 67910775L

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
350717-2-007-0600

LOT

C

BLOCK

PLAT NAME

3P. 96-029

SECTION/TOWNSHIP/RANGE

17-35N-7E

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

George S. Taylor

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS

8356 Pinnelli Rd Sedro Wooley WA 98284

NAME OF LEGAL OWNER

Gold Savings Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS

P.O. Box 5010

CITY

Lynnwood

STATE

WA.

ZIP CODE

98046

GRANTEE

NAME

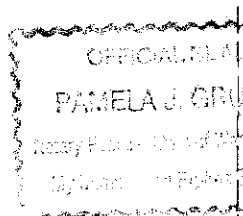
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

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 Snohomish
County ofSigned or attested
before me on 7-4-01

PAMELA J. GRUBB

by George S Taylor

Signature

Pamela J. Grubb

PRINT NAME OF REGISTERED OWNER

NOTARY OR AGENT

Pamela J. Grubb

PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY

Title Notary

AND: County/Office No. OR 3602

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: ☒ 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)

BLDG PERMIT OFFICE/PHONE #

BLDG PERMIT #

SIGNATURE / POSITION

SKAGIT COUNTY PERMIT CENTER 336-9410

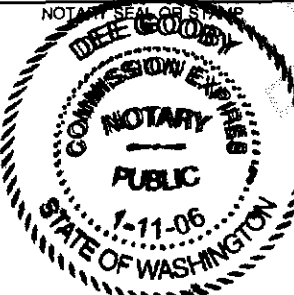
DATE 2/14/02

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

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>2-4-02</u>
	by <u>Golf Savings Bank</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by <u>Carol M. Wacker-Saunders</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> PRINTED NAME OF NOTARY
Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR <u>1-11-06</u> 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 C of Short Plat # 96-029, Approved OCT 20, 1998, recorded OCT 27, 1998 in book 13 of Short Plats, page 177 under Auditors File # 9810270124 records of Skagit County State of Washington and being a ptn of the SE 1/4 of the NW 1/4 of Sec 17, T36N, R7E W.M. Together with a non-exclusive easement for utilities over, under and across easterly 10 Ft of Lot D of SP. No 96-029

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>7-6-01</u>
PURCHASE PRICE <u>80200-</u>	TAX JURISDICTION/TAX RATE <u>7.8</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 Angulo</u>	COUNTY OFFICE/FS OPERATOR NUMBER <u>2901-0</u>
SIGNATURE <u>[Signature]</u>	DATE <u>02/15/02</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, Manu

The Department of Licens.
If you need special accom



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