



200204230241

Skagit County Auditor

4/23/2002 Page 1 of 2 4:06PM

RETURN ADDRESS

Island Title Company
P. O. Box 1619
Stanwood, WA 98292
B18614/ST01464

MANUFACTURED HOME LICENSING APPLICATION
PLEASE CHECK ONE
TITLE ELIMINATION
TRANSFER IN LOCATION
REMOVAL FROM REAL PROPERTY
1 MANUFACTURED HOME
TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH (FEET) VEHICLE IDENTIFICATION NUMBER (VIN) Serial #
2 LAND
LEGAL DESCRIPTION ON PAGE 2
MANUFACTURED HOME WILL BE AFFIXED REMOVED
REAL PROPERTY TAX PARCEL NUMBER 330434-3-004-0400
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 DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL REGISTERED OWNER DOL CUSTOMER ACCOUNT NUMBER
ADDRESS CITY STATE ZIP CODE
NAME OF LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER
ADDRESS CITY STATE ZIP CODE
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 Snohomish Signed or attested before me on 12/13/01
by Michael G. Lehmann Signature Janice L. Verburg
by Becky S. Lehmann Signature Janice L. Verburg
NOTARY PUBLIC
STATE OF WASHINGTON
DEALERSHIP POSITION/AGENT/NOTARY AND: County/Office No. OR Dealer No. OR 8/15/04
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 DATE
Cindy Gauthier BPO1-1153 BPO1-1153
Cindy Gauthier SKAGIT COUNTY PERMIT CENTER 4/22/2002

**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, A.V. Co.*

Signature of Agent, Legal Owner and Title, IF APPLICABLE

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**

State of Washington *Snohomish* Signed or attested before me on *12/18/01*  
 County of *Snohomish*

*Carol M. Warren* Signature *Maria Parsons*  
 PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

by *for her* PRINTED NAME OF NOTARY  
 TITLE DEALERSHIP POSITION/AGENT/NOTARY **MARIA PARSONS**

AND: County/Office No. OR *91103*  
 Dealer No. OR  
 Notary Expiration Date

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

Lot 4 of Skagit County SHORT PLAT NO. 91-0009, as approved May 22, 1991, and recorded May 23, 1991, in Volume 9 of Short Plats, pages 364 and 365, under Auditor's File No. 9105230038, records of Skagit County, Washington; being a portion of the Southwest Quarter of Section 34, Township 33 North, Range 4 East of the Willamette Meridian.

**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) <i>COACH CORRAL INC</i>	WA DEALER NUMBER <i>4278</i>	DATE OF SALE <i>2-4-02</i>
PURCHASE PRICE <i>34762-</i>	TAX JURISDICTION/TAX RATE <i>7.6</i>	DEALER'S AUTHORIZED SIGNATURE <i>Linda Milbourn</i>

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) <i>Peggy A. Biedell-Graham</i>	COUNTY OFFICE/VEH OPERATOR NUMBER <i>2901-04</i>
SIGNATURE <i>Peggy A. Biedell-Graham</i>	DATE <i>4/23/02</i>

**10 TITLE FEES**

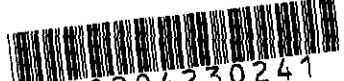
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX

**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, please call (360) 902-3600 or TTY (206) 463-3600.

  
 200204230241  
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 4/23/2002 Page 2 of 2 4:06PM