



200207230001

Skagit County Auditor

7/23/2002 Page 1 of 2 8:40AM

RETURN ADDRESS

FIRST AMERICAN TITLE
601 STATE AVENUE
MARYSVILLE, WA 98270

FIRST AMERICAN TITLE CO.



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: %56373, YEAR: 1983, MAKE: HILLC, LENGTH/WIDTH(FEET): 52 X 24, VEHICLE IDENTIFICATION NUMBER (VIN): 02910161S

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER: 331029-2-004-0008

LOT, BLOCK, PLAT NAME, SECTION/TOWNSHIP/RANGE: 29-33-10

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

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER, NUMBER OF REGISTERED OWNERS: 2, NUMBER OF LEGAL OWNERS: 1

NAME OF REGISTERED OWNER: JOHN S. BRYSON

NAME OF ADDITIONAL REGISTERED OWNER: KIM L. BRYSON

ADDRESS: P.O. BOX 901, CITY: DARRINGTON, STATE: WA, ZIP CODE: 98241

NAME OF LEGAL OWNER: LONG BEACH MORTGAGE COMPANY

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS: 4640 SW MACADAM STE 250, CITY: PORTLAND, STATE: OR, ZIP CODE: 97201

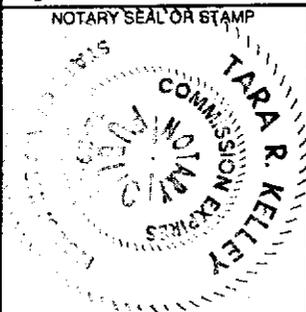
GRANTEE

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: John S. Bryson

Signature of Additional Registered Owner and Title, IF APPLICABLE: Kim L. Bryson



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington, County of SNOHOMISH, Signed or attested before me on 4/5/02, by JOHN S. BRYSON, Signature Tara Kelley, PRINTED NAME OF NOTARY Tara Kelley, AND: County/Office No. OR, Dealer No. OR 12/29/05, 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): Cindy Gauthier, BLDG PERMIT OFFICE/PHONE #: 360-336-9410, BLDG PERMIT #: BPO2-0002

SIGNATURE / POSITION: Cindy Gauthier, Support Services, SKAGIT COUNTY PERMIT CENTER, DATE: 4-24-2002

UNRECORDED

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]*

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of ~~Washington~~ *Oregon*

County of *Multnomah*

Signed or attested before me on *4.10.02*

by *Scott Smith*
PRINT NAME OF LEGAL OWNER

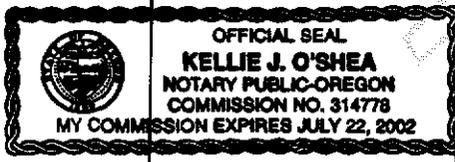
Signature *[Signature]*
NOTARY OR AGENT

by _____
PRINT NAME OF LEGAL OWNER

Kellie J O'Shea
PRINTED NAME OF NOTARY

Title *Notary Public*
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR _____
Dealer No. OR _____
Notary Expiration Date *7/22/02*



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

THAT PART OF THE SOUTHWEST 1/4 OF THE NORTHWEST 1/4 OF SECTION 29, TOWNSHIP 33 NORTH, RANGE 10 EAST, W.M., EMBRACED WITHIN THE FOLLOWING BOUNDARIES, TO WIT: BEGINNING AT THE SOUTHWEST CORNER OF SAID SOUTHWEST 1/4 OF THE NORTHWEST 1/4; THENCE DUE EAST 80 RODS; THENCE NORTH 20 RODS; THENCE WEST 80 RODS; THENCE SOUTH 20 RODS TO THE PLACE OF BEGINNING: EXCEPT COUNTY ROAD RIGHT-OF-WAY CONVEYED TO SKAGIT COUNTY BY DEED DATED SEPTEMBER 26, 1963, RECORDED SEPTEMBER 30, 1963 UNDER AUDITOR'S FILE NO. 641396.

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
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PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE
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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/VES OPERATOR NUMBER
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SIGNATURE	DATE
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10 TITLE FEES

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
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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, please contact us at 1-800-333-3333.



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