

RETURN ADDRESS

Albert Nahoopii

3413 Woodcrest Ln.

Sedro Woolley, WA 98284



200207230089

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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2001	Fleetwood	66 X 27	ORFL148AB28099-AV13	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER 4687-000-010-0000/P110937		
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
J		Parson Creek Acres			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		2		1	
NAME OF REGISTERED OWNER					
Albert A. Nahoopii					
NAME OF ADDITIONAL REGISTERED OWNER					
Chantel L. Nahoopii					
ADDRESS		CITY		STATE	ZIP CODE
3413 Woodcrest Ln., Sedro Woolley, WA 98284					
NAME OF LEGAL OWNER					
Washington Mutual Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY		STATE	ZIP CODE
1336 Cornwall Ave., 2nd Fl./6613LWA, Bellingham, WA 98225					
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 <i>Albert A. Nahoopii</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Chantel L. Nahoopii</i>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		County of Skagit		Signed or attested before me on 7/18/01	
by Albert A. Nahoopii		Signature <i>Candace M. Taylor</i>		NOTARY OR AGENT	
PRINT NAME OF REGISTERED OWNER		Candace M. Taylor		PRINTED NAME OF NOTARY	
by Chantel L. Nahoopii		County/Office No. OR		Dealer No. OR 01/01/05	
PRINT NAME OF REGISTERED OWNER		AND: Notary Expiration Date			
Title notary		DEALERSHIP POSITION AGENT/NOTARY			
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:					
<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 # 536-9410		BLDG PERMIT #
ELIZABETH SCHUTT/SKAGIT CO PERMIT CENTER					PP01-0550
SIGNATURE / POSITION			DATE		
<i>E. Schutt / Supp. Ins.</i>			4/15/02		

6 SIGNATURE OF LEGAL OWNER

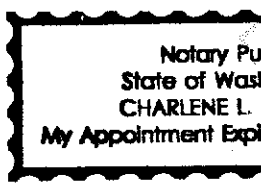
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

	State of Washington	Signed or attested before me on	7-19-01
	County of Whatcom	Signature	Charlene L. Neyens
	PRINT NAME OF LEGAL OWNER	NOTARY OR AGENT	
	by B. Noble, mgr	PRINTED NAME OF NOTARY	Charlene L. Neyens
	Title Notary	AND: County/Office No. OR	2/7/04
	DEALERSHIP POSITION/AGENT/NOTARY	Dealer No. OR	
		Notary Expiration Date	

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

Lot J, "PLAT OF PARSON CREEK ACRES", as per plat recorded in Volume 16 of Plats, pages 149 through 151, inclusive, records of Skagit County, Washington.

Situate in the County of Skagit, State of 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)	WA DEALER NUMBER	DATE OF SALE
MERIDIAN HOME CENTER, INC.	#4398	7-20-01
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE
71,069.11	7.9%	Michael D. Jurne
<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)	COUNTY OFFICE/VFS OPERATOR NUMBER
Rodrigo ANGULO	2901-05
SIGNATURE	DATE
	07/23/02

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
If you need special accomm.

