

RETURN ADDRESS

FIRST American Title Co.  
 PO Box 1667  
 Mount Vernon WA 98273  
 67526



200207310001  
 Skagit County Auditor

7/31/2002 Page 1 of 2 8:33AM

Planning/Permit Ctr.

**STATE OF WASHINGTON**  
 Department of  
**LICENSING**

**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)
@87967	1977	KWOOD	70 X 14	6302

**2 LAND LEGAL DESCRIPTION ON PAGE**

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
 3919-000 003 0001

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
TR. 3		Glenwood Acres Plat	

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE**

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

NAME OF REGISTERED OWNER  
 Delaney; Richard F.

NAME OF ADDITIONAL REGISTERED OWNER  
 Delaney; Richard F. Sharel L.

ADDRESS CITY STATE ZIP CODE  
 9556 Glenwood Acres Rd., Sedro Woolley WA 98284

NAME OF LEGAL OWNER  
 CTX Mortgage Company LLC

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE  
 3100 McKinnon 2nd Fir Dallas TX 75201

**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 *Richard F. Delaney*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Sharel L. Delaney*

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

NOTARY PUBLIC  
 KIM M. KERR  
 COMMISSION EXPIRES 12-15-05  
 STATE OF WASHINGTON

State of Washington County of Skagit Signed or attested before me on 7-24-02

Richard F. Delaney Signature Kim M. Kerr  
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

Sharel L. Delaney Signature Kim M. Kerr  
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

Title CLerk AND: County/Office No. OR Dealer No. OR Notary Expiration Date  
 DEALERSHIP POSITION/AGENT/NOTARY 12/15/05

**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  
Peggy A. Riedell-Graham 29-01-04

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 #  
TAWNIE BESMAN 336-9410 BPO1-1629

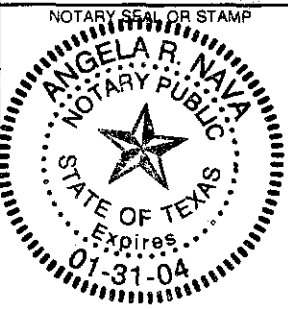
SIGNATURE / POSITION DATE  
Clawde Besman Support Services 04/04/02

**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 *x Carter H. Ward, Loan Closser*

Signature of Additional Legal Owner and Title, IF APPLICABLE \_\_\_\_\_



**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**  
 State of ~~Washington~~ *Texas*  
 County of *Dallas*  
 Signed or attested before me on *7/26/02*  
 by *CTR Mortgage Co, LLC* Signature *Angela R. Nava*  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT  
 by *Carter H. Ward* *ANGELA R. Nava*  
PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY  
 Title \_\_\_\_\_ AND: County/Office No. OR *1/31/04*  
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)**

*TR. 3 Glenwood Acres Plat, Skagit Co., WA as per plat recorded in Vol. 7 of Plats, pg. 95, records of Skagit Co, WA, being a ptn. of S23, +35N, R4E, W.M.*

**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
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	

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. RIEDEL-GRAHAM</i>	COUNTY OFFICE/AFS OPERATOR NUMBER <i>29-01-04</i>
SIGNATURE <i>Peggy A. Riedel-Graham</i>	DATE <i>7/31/02</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  
If you need special accommodations



Skagit County Auditor