

## RETURN ADDRESS

FIRST AMERICAN TITLE

1301 B Riverside Drive

Mt. Vernon, WA 98273

01-64291



200208020001

Skagit County Auditor

8/2/2002 Page

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8:40AM

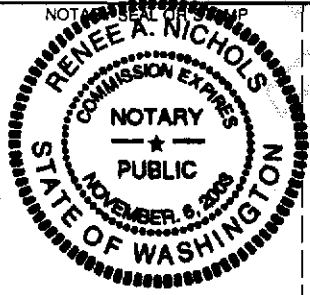
		<b>MANUFACTURED HOME APPLICATION</b>		<b>PLEASE CHECK ONE</b> <input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, imprisonment, or both. (RCW 46.12.210)					
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2001	LIBERTY	66 X 40	09L34389XTU	
<b>2 LAND</b>					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER 360334-2-006-01048 248848		
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
			34,36,3		
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER					
CARL JAMES HENDRICKS					
NAME OF ADDITIONAL REGISTERED OWNER					
KERRI LYNN FRASER					
ADDRESS		CITY	STATE	ZIP CODE	
15165 Estes Rd.		BOW	WA	98232	
NAME OF LEGAL OWNER					
HORIZON BANK					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
1500 CORNWALL AVENUE		BELLINGHAM	WA	98225	
<b>GRANTEE</b>					
NAME					
same as registered owner					
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					
Kerri Lynn Fraser					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
Carl James Hendricks					
NOTARY SEAL OR STAMP 		<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>			
State of Washington		County of		Signed or attested before me on	
		Skagit		6-15-01	
by		Carl James Hendricks		Signature	
		Kerri Lynn Fraser		NOTARY OR AGENT	
PRINT NAME OF REGISTERED OWNER		Katie E. Hickok		PRINTED NAME OF NOTARY	
by		Katie E. Hickok		County/Office No. OR	
Title		AND:		Dealer No. OR	
DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date		7-2003	
<b>4 TITLE COMPANY CERTIFICATION</b>					
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.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that:					
<input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input 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 #		BLDG PERMIT #	
BPO1-0515					
SIGNATURE / POSITION		DATE			

# 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 HORIZON BANK Shawn Hoffer

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

	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>	
	State of Washington County of <u>Whatcom</u>	Signed or attested before me on <u>7-23-02</u>
	by <u>HORIZON BANK</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>RENEE A NICHOLS</u>
Title <u>NOTARY</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>11-4-03</u>

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

The NW1/4 of the NW1/4 of S34, T36N, R3E, W.M., EXCEPT Old Hwy 99 along the W line thereof, AND EXCEPT ditch rights-of-way, AND EXCEPT Tr A of Rev. Skagit Co. SP NO. 27-77, app 10-6-77, and rec. 10-6-77, in Vol. 2 of SP, Pg 137, under AFN 866232, rec. of Skagit Co., WA.  
(Being the remainder portion of said Revised Skagit County Short Plat No. 27-77, referred to above. )

# 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>VALLEY HOMES</u>	WA DEALER NUMBER <u>4117</u>	DATE OF SALE <u>3-31-01</u>
PURCHASE PRICE <u>92,201.40</u>	TAX JURISDICTION/TAX RATE <u>7.8</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>
<input type="checkbox"/> <b>USE TAX EXEMPT</b> 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/VES OPERATOR NUMBER <u>2901-05</u>
SIGNATURE <u>[Signature]</u>	DATE <u>08/01/02</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, Manufactured Home Application Instructions.

The Department of License  
If you need special accommodations



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Skagit County Auditor