

RETURN ADDRESS

200210170094
Skagit County Auditor

10/17/2002 Page 1 of 2 11:50AM

ISLAND TITLE CO. 224110

STATE OF WASHINGTON Department of Licensing		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)	
	2002	GREENBRIAR	44X28	2191-0160-R AB	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER P108152 4667-000-003-0000	
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
3		CASCADE HEIGHTS			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
29		2		1	
NAME OF REGISTERED OWNER DONALD R. MACE					
NAME OF ADDITIONAL REGISTERED OWNER ANNA MACE					
ADDRESS		CITY	STATE	ZIP CODE	
1119 South 12th Street		Mount Vernon	WA	98273	
NAME OF LEGAL OWNER AMERICA'S WHOLESALE LENDER					
NAME OF ADDITIONAL LEGAL OWNER					
4500 Park Granada		Calabasas, CA		91302	
ADDRESS		CITY	STATE	ZIP CODE	
GRANTEE					
NAME DONALD R MACE AND ANNA MACE					
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 <u>Donald Mace</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Anna Mace</u>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of <u>SKAGIT</u>		Signed or attested before me on <u>9/26/02</u>			
by <u>DONALD MACE</u> PRINT NAME OF REGISTERED OWNER		Signature <u>Marcie K Paleck</u> NOTARY OR AGENT MARCIE K. PALECK			
by <u>ANA MACE</u> PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title <u>NOTARY</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR <u>10/15/02</u> 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: <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 #	
<u>DON PAYNE</u>		<u>360-853-8401</u>		<u>02-017</u>	
SIGNATURE / POSITION		DATE			
<u>Don Payne Building Inspector</u>		<u>10-4-02</u>			

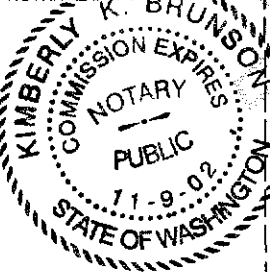
6 SIGNATURE OF LEGAL OWNER

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

Signature of Legal Owner and Title, IF APPLICABLE John Lee

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP

**NOTARIZATION CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington
County of KingSigned or attested
before me on Oct 14, 2002PRINT NAME OF LEGAL OWNER John LeePRINT NAME OF LEGAL OWNER NotaryTitle Notary
DEALERSHIP POSITION/AGENT/NOTARYSignature Kimberly R. BrunsonPRINTED NAME OF NOTARY Kimberly R. BrunsonCounty/Office No. OR
Dealer No. OR
Notary Expiration Date 11/9/02**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

LOT 3, CASCADE HEIGHTS, according to the plat thereof,
recorded in Volume 16 of Plats, pages 85 and 86, records
of Skagit County, Washington.
Situated in Skagit County, 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)

Coach Corral

WA DEALER NUMBER

4278

DATE OF SALE

10-1-02

PURCHASE PRICE

45319-

TAX JURISDICTION/TAX RATE

7.9

DEALER'S AUTHORIZED SIGNATURE

Linda Milbourn

☐ 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)

James Willis

COUNTY OFFICE/YES OPERATOR NUMBER

2901-21

SIGNATURE

James Willis 2901-21

DATE

10/17/02

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 has a policy of providing equal access to its services.
If you need special accommodation, call 1-800-833-8888.



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