

RETURN ADDRESS



200302100005

Skagit County Auditor

2/10/2003 Page 1 of 2 8:50AM

Cecelia Smith

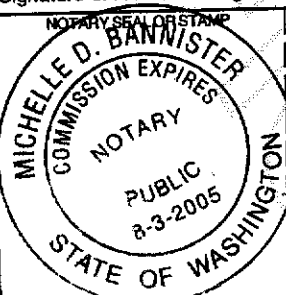
526 Township Street

Sedro Woolley, Wa. 98284

LAND TITLE COMPANY OF SKAGIT COUNTY

T-104385

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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)				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER 015826	YEAR 1991	MAKE Oakma	LENGTH/WIDTH(FEET) 48 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 06910483DAB	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			LEGAL DESCRIPTION ON PAGE		
			REAL PROPERTY TAX PARCEL NUMBER 799642		
LOT 3	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE Short Plat No. SW 4-90		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS 1		NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER Cecilia Ann Smith				DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS 821 Northern		CITY Sedro Woolley		STATE Wa.	ZIP CODE 98284
NAME OF LEGAL OWNER Frontier Bank				DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS P O Box 1124		CITY Mount Vernon,		STATE Wa.	ZIP CODE 98273
GRANTEE					
NAME same as grantor					
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>Cecilia Ann Smith</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP 		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of <u>Skagit</u>		Signed or attested before me on <u>1/23/03</u>	
		by <u>Cecilia Ann Smith</u> PRINT NAME OF REGISTERED OWNER		Signature <u>K. Franey</u> NOTARY OR AGENT	
		by PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY <u>K. FRANEY</u>	
		Title DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 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) Kaydeen Franey		TITLE COMPANY / PHONE NUMBER Land Title Company			
SIGNATURE / POSITION Closer		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 checked="" type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.					
NAME (TYPED OR PRINTED) Arnell McCombs		BLDG PERMIT OFFICE/PHONE # Building & Planning 360-855-0771		BLDG PERMIT # 2852	
SIGNATURE / POSITION <u>Arnell McCombs</u>		DATE 2/6/03			

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 <u>D. Jani Long, AWP Frontier Bank</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington _____ County of <u>Skagit</u> Signed or attested before me on <u>1-28-03</u> by <u>Frontier Bank</u> Signature <u>Michelle D Bannister</u> <small>PRINT NAME OF LEGAL OWNER NOTARY OR AGENT</small> by _____ <small>PRINT NAME OF LEGAL OWNER</small> Title _____ <small>DEALERSHIP POSITION/AGENT/NOTARY</small> AND: _____ <small>County/Office No. OR Dealer No. OR Notary Expiration Date</small> <u>8-3-05</u>			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's					
Lot 3, City of Sedro Woolley Short Plat No. SW 04-90, approved July 31, 1990, recorded July 31, 1990 in Book 9 of Short Plats, page 247, under Auditor's File No. 9007310055 and being a portion of Lots 24 and 25, PLATE NO. 1, SEDRO HOME ACREAGE, SKAGIT CO., WASH., 1904", as per plat recorded in Volume 3 of Plats, page 39 records of Skagit County, Washington. Situate in the City of Sedro Woolley, County of Skagit, State of Wash.					
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			
<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) <u>PEGGY H. RIEDEL-GRAHAM</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-04</u>		
SIGNATURE <u>Peggy H. Riedel-Graham</u>			DATE <u>2/10/03</u>		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>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.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px auto; width: 80%;"> <p>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.</p> </div> <p>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.</p>					

The Department of Licensing has a policy of providing equal access to its services.
If you need special accommodation, please call (360) 902-3600 or TTY (360) 664-8885.



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