

RETURN ADDRESS

Lynnwood Escrow  
 P.O. Box 5857  
 Lynnwood, WA. 98046  
 ESC. # 20021038



200303040120  
 Skagit County Auditor

3/4/2003 Page 1 of 4 11:49AM

**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)
	03	FLTWD	52 X 28	ORFL24828933GH13

**2 LAND**

LEGAL DESCRIPTION ON PAGE \_\_\_\_\_

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
 3882-800-0190303

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)**

ADDITIONAL NAMES ON PAGE \_\_\_\_\_

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS

NAME OF REGISTERED OWNER  
 Kenneth O. Hoffman

NAME OF ADDITIONAL REGISTERED OWNER  
 Gloria R. Hoffman

ADDRESS	CITY	STATE	ZIP CODE
23512 Garden St.	Mt. Vernon	WA.	98274

NAME OF LEGAL OWNER  
 Golf Savings Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS	CITY	STATE	ZIP CODE
P.O. Box 5010	Lynnwood	WA.	98046

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 *Kenneth O. Hoffman*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Gloria R. Hoffman*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington  
 City of Snohomish

Signed or attested before me on 9-9-02

Signature *Pamela J. Grubb*  
 NOTARY OR AGENT

PRINTED NAME OF NOTARY  
 Pamela J. Grubb

AND: County/Office No. OR 316-06  
 Dealer No. OR  
 Notary Expiration Date

PAMELA J. GRUBB  
 NOTARY PUBLIC  
 STATE OF WASHINGTON  
 COMMISSION EXPIRES  
 MARCH 6, 2006

Kenneth O. Hoffman  
 Registered Owner

Gloria R. Hoffman  
 Registered Owner

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:  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 #
Georgine Rosson	336-9410	BPO2-0886

SIGNATURE / POSITION *Georgine Rosson Support Services* DATE 2/27/03

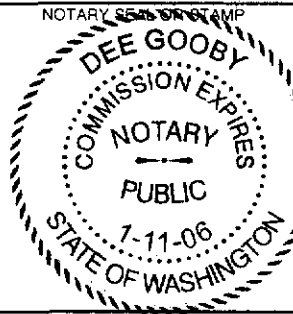
SKAGIT COUNTY PERMIT CENTER

**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 Nancy Fontaine, Sr VP

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



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

State of Washington County of Snohomish Signed or attested before me on 1-10-03

by Golf Savings Bank Signature [Signature]  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT  
by Nancy Fontaine, Sr. VP PRINTED NAME OF NOTARY  
PRINT NAME OF LEGAL OWNER

Title Notary AND: County/Office No. OR Dealer No. OR Notary Expiration Date 1-1-06  
DEALERSHIP POSITION/AGENT/NOTARY

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

Ptn of Lots 18, 19, 23, "CHEASTY'S BIG LAKE TRACTS"

**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 INC WA DEALER NUMBER 4278 DATE OF SALE 9-16-02

PURCHASE PRICE 59509- TAX JURISDICTION/TAX RATE 7.6 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) Harrie Willis COUNTY OFFICE/VEHICLE OPERATOR NUMBER 290121

SIGNATURE [Signature] DATE \_\_\_\_\_

**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 accommoc



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# MANUFACTURED HOME APPLICATION ADDITIONAL ATTACHMENT

## Legal Description of Land

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- Title Elimination
- Removal From Real Property
- Transfer In Location

LAND:

PROPERTY TAX PARCEL NUMBER:

3882-000-019-0303

LEGAL DESCRIPTION:

Parcel "A":

That portion of Tracts 18, 19 and 23, "PLAT OF CHEASTY'S BIG LAKE TRACTS, SKAGIT COUNTY, WASHINGTON", as per plat recorded in Volume 4 of Plats, page 49, records of Skagit County, Washington, more particularly described as follows:

Beginning at the Northeast corner of said Tract 19; thence South 58 degrees 02'38" West along the Northwesterly line of said Tract 19, a distance of 20.00 feet; thence South 31 degrees 18'42" East parallel with the Northeasterly line of said Tract 19, a distance of 80.00 feet; thence South 58 degrees 02'38" West, a distance of 93.08 feet; thence South 33 degrees 00'15" East, a distance of 55.85 feet; thence South 86 degrees 00'00" East, a distance of 47.19 feet; thence North 59 degrees 11'57" East, a distance of 72.93 feet to the Northeasterly line of said Tract 23; thence North 31 degrees 18'42" West along the Northeasterly line of said Tract 23 and said Tract 19, a distance of 165.03 feet to the true point of beginning;

ALSO KNOWN AS Tract "D" of Survey recorded in Volume 5 of Surveys, pages 67 and 68, under Auditor's File No. 8310180016.

Parcel "B":

An undivided 1/9 interest in and to the following:

That portion of Tract 53, "PLAT OF CHESTY'S BIG LAKE TRACTS, SKAGIT COUNTY, WASHINGTON", as per plat recorded in Volume 4 of Plats, page 49, records of Skagit County, Washington, lying Southerly of the following described line:

Beginning at the Northeasterly corner of said Tract 53; thence South 66 degrees 21'46" West along the Northerly line of said tract, a distance of 117.79 feet to the true point of beginning of this line; thence Easterly to a point on the Easterly line of said Tract 53 that is 25.30 feet South of the Northeasterly corner of said tract, as measured along the East line thereof and the terminus of said line.



# OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

**CHECK THE TYPE OF APPLICATION:**

- Title Elimination
- Removal From Real Property
- Transfer In Location

**PROPERTY TAX PARCEL NUMBER:**

ADDITIONAL GRANTOR(S) REGISTERED OWNER(S)	
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF REGISTERED OWNER(S)	
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARY SEAL OR STAMP	<b>NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b> State of Washington County of _____ Signed or attested before me on _____ by _____ Signature _____ Printed Name of Applicant Notary or Agent Printed name of Notary Title _____ Dealer No. OR Dealership Position/Agent/Notary AND: County/Office No. OR Notary Expiration Date

*The Department of Licensing has a process for special accommodations. If you need special accommodation, please call 1-800-541-4200.*



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