

RETURN ADDRESS

JONATHAN R. FOX
JOY K. FOX
1400 WILLIAM WA #10
MOUNT VERNON WA 98273-6201



200304090183
 Skagit County Auditor

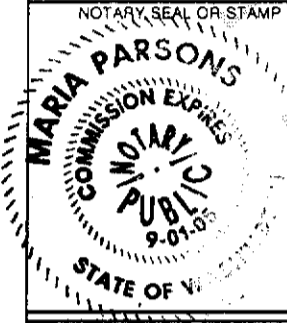
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ISLAND TITLE CO. B9639

ACCOMMODATION RECORDING

		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		REAL PROPERTY TAX PARCEL NUMBER <u>350620-3-006-0007</u>	
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	<u>2003</u>	<u>SKYLINE</u>	<u>45 X28</u>	<u>9U91-0165-R</u>	
2 LAND		LEGAL DESCRIPTION ON PAGE _____			
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
		<u>PTN SW SW, S20, T35N, R6E WM</u>			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)		ADDITIONAL NAMES ON PAGE _____			
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	<u>2</u>		<u>1</u>		
NAME OF REGISTERED OWNER					
<u>JONATHAN R. FOX</u>					
NAME OF ADDITIONAL REGISTERED OWNER					
<u>JOY K. FOX</u>					
ADDRESS		CITY	STATE	ZIP CODE	
<u>31010 WALBERG RD.</u>		<u>SEDRO WOOLEY</u>	<u>WA</u>	<u>98284</u>	
NAME OF LEGAL OWNER					
<u>GOLF SAVINGS BANK</u>					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
<u>6505 218TH ST SW STE #9</u>		<u>MOUNTLAKE TERRACE</u>	<u>WA</u>	<u>98043</u>	
GRANTEE					
NAME					
<u>DEPARTMENT OF LICENSING, STATE OF WASHINGTON</u>					
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>Jonathan R. Fox</u>			
Signature of Additional Registered Owner and Title, IF APPLICABLE		<u>Joy K. Fox</u>			
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on <u>7-23-02</u>	
		County of <u>Skagit</u>			
		by <u>Jonathan R. Fox</u>		Signature <u>Maryanne Meyer</u>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
by <u>Joy K. Fox</u>		PRINTED NAME OF NOTARY			
PRINT NAME OF REGISTERED OWNER		County/Office No. OR		AND: Dealer No. OR <u>3-5-05</u>	
Title <u>Notary</u>		DEALERSHIP POSITION/AGENT/NOTARY		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>Georgine Rossen</u>		<u>SKAGIT COUNTY PERMIT CENTER 336-9410</u>		<u>BP02-0622</u>	
SIGNATURE / POSITION		DATE			
<u>Georgine Rossen</u>		<u>Support Services</u>		<u>4/14/03</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 Carol M. Warren, SR VICE PRES
 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 9/24/02
 by Carol M. Warren Signature Maria Parsons
 PRINT NAME OF LEGAL OWNER NOTARY OR AGENT
 by _____ PRINTED NAME OF NOTARY MARIA PARSONS
 Title Under AND: County/Office No. OR Dealer No. OR Notary Expiration Date 9/1/05
 DEALERSHIP POSITION/AGENT/NOTARY

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

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 7-29-02
 PURCHASE PRICE 57500 - TAX JURISDICTION/TAX RATE 7.8 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) Husty Lowery COUNTY OFFICE/VFS OPERATOR NUMBER 290108
 SIGNATURE Husty Lowery DATE 9/9/03

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
If you need special





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:

350620-3-006-0007

LEGAL DESCRIPTION:

The North Half of the West Half of the West Half of the Southwest Quarter of the Southwest Quarter of Section 20, Township 35 North, Range 6 East of the Willamette Meridian;

EXCEPT the following described tract:

Beginning at the Northeast corner of the West Half of the West Half of the Southwest Quarter of the Southwest Quarter of said section;
Thence South a distance of 208.71 feet;
Thence West a distance of 208.71 feet;
Thence North a distance of 208.71 feet;
Thence East to the point of beginning.

Situated in Skagit County, Washington.



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Skagit County Auditor