

RETURN ADDRESS

FIRST AMERICAN TITLE

160 CASCADE PL #104

BURLINGTON, WA 98233



200304150211

Skagit County Auditor

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B69985

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)
	2002	Redman	28 X 40	118-28641A/Bz

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
4784-000-006-000 P118547

LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
6		Merimbula	

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		DOL CUSTOMER ACCOUNT NUMBER
NORBERTO DIAZ		DIAZDN-2100
NAME OF ADDITIONAL REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER
CLAUDIA DIAZ		DIAZCY180NB
ADDRESS	CITY	STATE ZIP CODE
23550 GARDEN ST.	MOUNT VERNON, WA	98274
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
ABN AMRO Mortgage Group		
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER
ADDRESS	CITY	STATE ZIP CODE
1201 East Lincoln	Madison Heights	MI 48071

GRANTEE

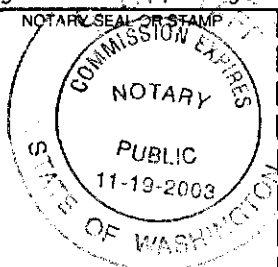
NAME

SAME AS REGISTERED OWNERS

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

Signature of Additional Registered Owner and Title, IF APPLICABLE



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington	Signed or attested before me on
County of Skagit	11-20-03
by Norberto Diaz	Signature
PRINT NAME OF REGISTERED OWNER	NOTARY OR AGENT
by Claudia Diaz	Cathy Rff
PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY
Title: 6M	County/Office No. OR
DEALERSHIP POSITION/AGENT/NOTARY	Dealer No. OR
	Notary Expiration Date
	11-19-03

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 #
TISH CAMPBELL	SKAGIT COUNTY PERMIT OFFICE 360/336-9410	BP001050
SIGNATURE / POSITION	DATE	
Tish Campbell, Support Services Tech	04/11/03	

6 SIGNATURE OF LEGAL OWNER
Signature of Legal Owner and Title, IF APPLICABLE
ABN AMRO Mortgage Group, Inc.
Signature of Additional Legal Owner and Title, IF APPLICABLE
Beverly J. Missig Assistant Vice Pres.

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE
State of Michigan
County of Oakland
Signed or attested before me on 01-29-03
Signature of Beverly J. Missig
PRINT NAME OF LEGAL OWNER
by Beverly J. Missig
PRINT NAME OF LEGAL OWNER
by Monica L. Davis
PRINT NAME OF NOTARY
County/Office No. Oakland County, MI
AND: Dealer No. OR
Notary Expiration Date 6-5-2005
DEALERSHIP POSITION/AGENT/NOTARY

7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's
LOT 6, PLAT OF MERIMBULA, AS RECORDED OCTOBER 30, 2001 UNDER SKAGIT
COUNTY AUDITOR'S FILE NO 200110300048.

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) Midway Homes
TAX JURISDICTION/TAX RATE 7.8% Michigan
DEALER'S AUTHORIZED SIGNATURE
DATE OF SALE 11-6-02
WA DEALER NUMBER 4171

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) Peggy A. Biddle-Graham
COUNTY OFFICE/AGENTS OPERATOR NUMBER 29-01-04
DATE 4/15/03

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 Licensing has a policy of providing equal access to its services. If you need special accomm.

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