

RETURN ADDRESS

Mr. & Mrs. Harvey Tincher

5110 Wild Life Acres

Sedro-Woolley, WA 98284

200304220155
Skagit County Auditor

4/22/2003 Page 1 of 2 4:02PM

P-98333-E

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)	
	1999	NASHUA	46 X 28	NNID38231AB	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 3869-009-011-0002	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
11	I	Cape Horn on the Skagit Div No. 2			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER TINCHER, HARVEY L.					
NAME OF ADDITIONAL REGISTERED OWNER TINCHER, BETTY L.					
ADDRESS		CITY	STATE	ZIP CODE	
5110 WILDLIFE ACRES		SEDRO-WOOLLEY,	WA	98284	
NAME OF LEGAL OWNER PEOPLES BANK					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
4183 MERIDIAN ST., 2ND FLOOR		BELLINGHAM	WA	98226	
GRANTEE					
NAME					
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AMWARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE <i>Harvey Tincher</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Betty R. Tincher</i>					
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>10-03-01</u>	
		by <u>Harvey C. Tincher</u> PRINT NAME OF REGISTERED OWNER		Signature <u><i>Carrie Huffer</i></u> NOTARY OR AGENT	
		by <u>Betty C. Tincher</u> PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY <u>Carrie Huffer</u>	
		Title <u>Notary Public</u>		AND: County/Office No. OR Dealer No. OR <u>12-31-03</u> Notary Expiration Date	
		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: <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 Rosson</u>		SKAGIT COUNTY PERMIT CENTER 336-9410		BP01-1254	
SIGNATURE / POSITION		DATE			
<u>Georgine Rosson</u> Support Services		2/12/03			

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

Carol R. Barber
for Peoples Bank

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*Whatcom*Signed or attested
before me on*4-21-03*by *Peoples Bank*
PRINT NAME OF LEGAL OWNERSignature *[Signature]*
NOTARY OR AGENT

PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title *Notary*
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR *12/1/2003*
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**LOT 11, BLOCK "I", "CAPE HORN ON THE SKAGIT DIVISION NO. 2", AS PER PLAT
RECORDED IN VOLUME 9 OF PLATS, PAGES 14 THROUGH 19, INCLUSIVE, RECORDS OF
SKAGIT COUNTY, WASHINGTON.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON.

8 DEALER'S REPORT OF SALEI 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

☐ 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)

COUNTY OFFICE/VFS OPERATOR NUMBER

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 has a policy of providing
If you need special accom.200304220155
Skagit County Auditor