

## RETURN ADDRESS

Kenn or Wendy L. Peterson  
18827 Blackberry Lane  
Mt Vernon WA 98274



200305210168  
Skagit County Auditor

5/21/2003 Page 1 of 2 2:16PM

STATE OF WASHINGTON Department of <b>Licensing</b>		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)					
<b>1 MANUFACTURED HOME</b>					
TRD / PLATE NUMBER <b>E48029</b>	YEAR <b>1988</b>	MAKE <b>Oak Manor</b>	LENGTH/WIDTH(FEET) <b>56 X 28</b>	VEHICLE IDENTIFICATION NUMBER (VIN) <b>06910471XAB</b>	
<b>2 LAND</b>					
LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER <b>P106725</b>					
LOT <b>2</b>	BLOCK	PLAT NAME <b>SHOT Plat</b>		SECTION/TOWNSHIP/RANGE <b>1-33-4</b>	
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS <b>2</b>		NUMBER OF LEGAL OWNERS <b>2</b>		
NAME OF REGISTERED OWNER <b>Kenn Peterson</b>					
NAME OF ADDITIONAL REGISTERED OWNER <b>Wendy L. Peterson</b>					
ADDRESS <b>18827 Blackberry Lane Mt Vernon WA 98274</b>					
CITY STATE ZIP CODE					
NAME OF LEGAL OWNER <b>Same as above</b>					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS CITY STATE ZIP CODE					
<b>GRANTEE</b>					
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					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
		<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b> State of Washington County of <b>Skagit</b> Signed or attested before me on <b>3/20/03</b> by <b>Kenn Peterson</b> Signature <b>Kari Peterson</b> PRINT NAME OF REGISTERED OWNER NOTARY OF AGENT by <b>Wendy L. Peterson</b> Signature <b>Kari Peterson</b> PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY Title _____ AND: County/Office No. OR DEALERSHIP POSITION/AGENT/NOTARY Dealer No. OR Notary Expiration Date <b>4/15/06</b>			
<b>4 TITLE COMPANY CERTIFICATION</b>					
I certify that the legal description of the land and ownership is true and correct per the real property records.					
NAME (TYPED OR PRINTED) <b>PERRY A. RIEDELL GRAHAM</b>				TITLE COMPANY / PHONE NUMBER	
SIGNATURE / POSITION <b>Perry A. Riedell Graham</b>				DATE	
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
I certify that: <input 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) <b>TRICIA WRIGHT</b>		BLDG PERMIT OFFICE/PHONE # <b>336 9410</b>		BLDG PERMIT # <b>BP02-1394</b>	
SIGNATURE / POSITION <b>Tricia Wright / Development Review Specialist</b>				DATE <b>5-21-03</b>	

**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 \_\_\_\_\_

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 \_\_\_\_\_Signed or attested  
before me on \_\_\_\_\_

by \_\_\_\_\_

PRINT NAME OF LEGAL OWNER

Signature \_\_\_\_\_

NOTARY OR AGENT

by \_\_\_\_\_

PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title \_\_\_\_\_

DEALERSHIP POSITION/AGENT/NOTARY

AND:

County/Office No. OR

Dealer No. OR

Notary Expiration Date

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

L  
E  
G  
A  
L  
D  
E  
S  
C

THAT PORTION OF LOT 2 SHORT  
PLAT#96-0066 AF#9805110151  
DEFINED AS FOLLOWS: TH PTN GOV  
LT 2 SEC 1 DAF: BAT SW COR OF  
SD GOV LT 2 TH N 0-55-57 E ALG  
THE W LINE OF SD GOV LT 2  
588.50FT TH N 60-23-59 E

**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 \_\_\_\_\_

☐ **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/VEHICLE OPERATOR NUMBER \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**10 TITLE FEES**

FILING FEE \_\_\_\_\_

APPLICATION \_\_\_\_\_

MOBILE HOME FEE \_\_\_\_\_

ELIMINATION FEE \_\_\_\_\_

USE TAX \_\_\_\_\_

SUBAGENT FEES \_\_\_\_\_

TOTAL FEES &amp; 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 non-discrimination.  
If you need special accommodations, please contact us.



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