



200306170084

Skagit County Auditor

6/17/2003 Page

1 of

2 10:56AM

RETURN ADDRESS

		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE <input type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input checked="" 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)	
	1972	Kentwood	60X 24	KW490	
2 LAND LEGAL DESCRIPTION ON PAGE <u>2</u>					
MANUFACTURED HOME WILL BE <input type="checkbox"/> AFFIXED <input checked="" type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER P36481		
LOT	BLOCK	FLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
Tract 1	None	Short Plat 80-78		13T35NR04E	
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				DOL CUSTOMER ACCOUNT NUMBER	
Ronald E. Wiese					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Cynthia M. Wiese					
ADDRESS		CITY		STATE ZIP CODE	
8861 Birch Ln, Sedro-Woolley				WA 98284	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Peoples Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
n/A					
ADDRESS		CITY		STATE ZIP CODE	
1801 Riverdale Dr		mt Vernon, WA		98273	
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				Ronald E. Wiese	
Signature of Additional Registered Owner and Title, IF APPLICABLE				Cynthia M. Wiese	
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		County of Skagit		Signed or attested before me on 6/6/03	
by Ronald E. Wiese		Signature		[Signature]	
by Cynthia M. Wiese		PRINTED NAME OF REGISTERED OWNER		NOTARY OR AGENT	
[Signature]		NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY	
Notary		County/Office No. OR		AND: Dealer No. OR	
		Notary Expiration Date 8/31/05			
4 TITLE COMPANY REPRESENTATION					
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		
Bill Ronhaar			LAWIS TITLE Co. 207-255-6403		
SIGNATURE / POSITION			DATE		
[Signature] MANAGER					
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 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 #	
SIGNATURE / POSITION				DATE	

UNNOTIFIED

MANUFACTURED HOME - FROM SECTION 1

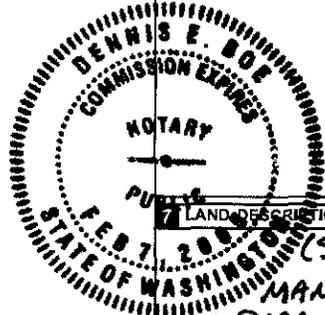
TPC / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH/FEET	VEHICLE IDENTIFICATION NUMBER (VIN)
	1972	Kentwood	60x24	KW490

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 *Carolyn Ward, U.P., 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 <i>Skagit</i>	Signed or attested before me on <i>4/6/03</i>
	by <i>Peoples Bank Carolyn Ward</i> PRINT NAME OF LEGAL OWNER	Signature <i>Dennis E Bice</i> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	<i>Dennis E Bice</i> PRINTED NAME OF NOTARY
Title <i>Notary</i> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR _____ Dealer No. OR _____ Notary Expiration Date <i>2/7/05</i>	

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

(SWFC) (TITLE ELIMINATION) INCLUDING MANUFACTURED HOME 1972 KENTWOOD 60X24 SERIAL NUMBER KW490 TRACT 1 OF SKAGIT COUNTY SHORT PLAT NUMBER 80-78 AUDITOR'S FILE NUMBER 890505 WHICH IS A PORTION OF THE SOUTHWEST 1/4 OF THE SOUTHWEST 1/4

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/VES OPERATOR NUMBER
<i>PEERY PATRICIA DELL GRAHAM</i>	<i>27-01-04</i>
SIGNATURE	DATE
<i>Peery Patricia Dell Graham</i>	<i>6/17/03</i>

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 if you need special accommodation, plea:



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