

RETURN ADDRESS

Lynnwood Escrow Corp
P.O. Box 5857
Lynnwood, WA. 98046
ESC. # 2003 0568



200309220214

Skagit County Auditor

9/22/2003 Page 1 of 3 3:27PM

FIRST AMERICAN TITLE CO:

77207

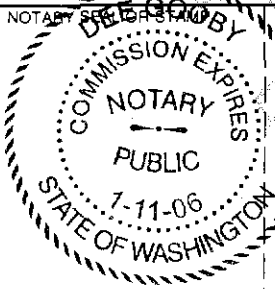
		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon 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)	
MSO	03	FLTWD	66 X40	WAFL331181548A13	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE			<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER
					3989-001-001-0006
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
Ptn 7		L.W.L Co's Samish Island Acreage No. 1			
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					
Alfred E. Whitlock					
NAME OF ADDITIONAL REGISTERED OWNER					
Tammany S. Whitlock					
ADDRESS		CITY	STATE	ZIP CODE	
9262 Avon Allen Rd.		Bow	WA.	98232	
NAME OF LEGAL OWNER					
Golf Savings Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
P.O. Box 5010		Lynnwood	WA.	98046	
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					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of <u>Snohomish</u> Signed or attested before me on <u>9/24/03</u> by <u>Alfred E. Whitlock</u> Signature PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT by <u>Tammany S. Whitlock</u> PRINTED NAME OF NOTARY <u>DEE GOOBY</u> PRINT NAME OF REGISTERED OWNER Title <u>Notary</u> AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>11-06</u> 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 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 #	
Cindy Gauthier		360-336-9410		BP03-0236	
SIGNATURE / POSITION		SKAGIT COUNTY PERMIT CENTER		DATE	
				9/19/03	

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 *Dee Grooby SVP*

Signature of Additional Legal Owner and Title, IF APPLICABLE _____



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington Spokane Signed or attested before me on 9/15/03
County of _____

by Nancy Fontaine SVP Signature *Dee Grooby*
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

by GOLF SAVINGS BANK PRINTED NAME OF NOTARY Dee Grooby
PRINT NAME OF LEGAL OWNER

Title NOTARY AND: County/Office No. OR _____ Dealer No. OR _____
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date 11-04

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

please see attached page 3.

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 5-27-03

PURCHASE PRICE 98900- TAX JURISDICTION/TAX RATE 7.6 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) Rodrigo Angulo COUNTY OFFICE/WFS OPERATOR NUMBER 290102

SIGNATURE *[Signature]* DATE 09-22-03

10 TITLE FEES

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
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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, please...



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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:

3189-001-001-0000

LEGAL DESCRIPTION:

Lot 1, "L.W.L. CO'S SAMISH RIVER ACREAGE, PLAT NO. 1, SKAGIT COUNTY, WASHINGTON", as per plat recorded in Volume 3 of Plats, Page 69, records of Skagit County, Washington, EXCEPT the following described tracts:

1. Beginning at the Northeast corner of the Southeast 1/4 of the Northeast 1/4 of Section 23, Township 35 North, Range 3 East, W.M.; thence South, 100 feet; thence West, 435.60 feet; thence North, 100 feet; thence East 435.60 feet to the point of beginning.
2. The East 435.60 feet of said Lot 1, "L.W.L. CO'S SAMISH RIVER ACREAGE. PLAT NO. 1, SKAGIT COUNTY, WASHINGTON". as per plat recorded in Volume 3 of Plats, Page 69, records of Skagit County, Washington, EXCEPT the North 125 feet thereof.



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