



200310270256
Skagit County Auditor

RETURN ADDRESS

Land Title Escrow

P.O. Box 445

Burlington, WA 98233

10/27/2003 Page

1 of 2 3:35PM

108696-PE

STATE OF WASHINGTON
Department of
Licensing

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 MSO	YEAR 1990	MAKE Liberty	LENGTH/WIDTH(FEET) X	VEHICLE IDENTIFICATION NUMBER (VIN) 09L24239XU
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
350412-1-004-0201 P103019

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER
CRABTREE, WAYNE ALLEN

NAME OF ADDITIONAL REGISTERED OWNER
CRABTREE, JODI LYNN

ADDRESS 23917 CORDY LANE	CITY SEDRO WOOLLEY	STATE WA	ZIP CODE 98284
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NAME OF LEGAL OWNER
CORNWELL, ARTHUR K., SR.

NAME OF ADDITIONAL LEGAL OWNER
CORNWELL, MARYANN

ADDRESS 23922 CORDY LANE	CITY SEDRO WOOLLEY	STATE WA	ZIP CODE 98284
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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 *Wayne Allen Crabtree*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Jodi Lynn Crabtree*

NOTARY SEAL OF STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of Skagit

Signed or attested before me on 10/02/03

by Wayne Allen Crabtree Signature *Wayne Allen Crabtree*
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by Jodi Lynn Crabtree Signature *Carrie Huffer*
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title Notary Public AND: County/Office No. OR
Dealer No. OR12/31/03
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date

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) DAWNIE BOSMAN	BLDG PERMIT OFFICE/PHONE # <u>334-9410</u> SKAGIT COUNTY PERMIT CENTER	BLDG PERMIT # 22008
SIGNATURE / POSITION <i>Dawnie Bosman</i>	SUPPORT SERVICE	DATE 10/09/03

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 *[Signature]*

Signature of Additional Legal Owner and Title, IF APPLICABLE *[Signature]*

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>10-6-03</u>
	by <u>Arthur K. Cornwell, Sr.</u> <small>PRINT NAME OF LEGAL OWNER</small>	Signature <i>[Signature]</i> <small>NOTARY OR AGENT</small>
	by <u>Maryann Cornwell</u> <small>PRINT NAME OF LEGAL OWNER</small>	<u>Carrie Huffer</u> <small>PRINTED NAME OF NOTARY</small>
Title <u>Notary Public</u> <small>DEALERSHIP POSITION/AGENT/NOTARY</small>	AND:	County/Office No. <u>OR</u> Dealer No. <u>OR</u> <u>12/31/03</u> <small>Notary Expiration Date</small>

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

Lot 3, Short Plat No. 90-32, recorded July 31, 1990, in Volume 9 of Short Plats, page 246, as Auditor's File No. 9007310009, records of Skagit County, Washington, and being a portion of the Northeast 1/4 of the Northeast 1/4 of Section 12, Township 35 North, Range 4 East, W.M.

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) <i>[Signature]</i>	COUNTY OFFICE/VES OPERATOR NUMBER <u>290108</u>
SIGNATURE <i>[Signature]</i>	DATE <u>10/27/03</u>

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
If you need special accommodation

