



200312080173
Skagit County Auditor

RETURN ADDRESS

12/8/2003 Page 1 of 2 4:08PM

Cobine Consulting & Assoc
307 NE Birch St.
Suite 206
Camas, WA 98607
73882

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 \$ 093105	YEAR 1978	MAKE SEACR	LENGTH/WIDTH(FEET) 24 X 66	VEHICLE IDENTIFICATION NUMBER (VIN) 2712
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER 340432-2-022-0206

LOT	BLOCK	PLAT NAME Tract B, Short Plat No. 16-73	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
Keith L. Birk

NAME OF ADDITIONAL REGISTERED OWNER
A. Laverne Birk

ADDRESS CITY STATE ZIP CODE
2914 Hollydale Acres MT. Vernon WA

NAME OF LEGAL OWNER
Same as above

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE

GRANTEE

NAME
TO THE PUBLIC

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 Keith L Birk

Signature of Additional Registered Owner and Title, IF APPLICABLE A. Laverne Birk

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Clark Signed or attested before me on 12/27/03

by Keith L Birk Signature [Signature] NOTARY OR AGENT

by A Laverne Birk Signature [Signature] PRINTED NAME OF NOTARY

Title Notary AND: County/Office No. OR 3/15/07 Dealer No. OR Notary Expiration Date

GARY W. COBINE
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
MARCH 15, 2007

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) BLDG PERMIT OFFICE/PHONE # BLDG PERMIT #
Georgine Bosson SKAGIT COUNTY PERMIT CENTER 336 9410 9281(576-678)

SIGNATURE / POSITION DATE
[Signature] Permit Tech 12/8/03

Done
in
1977

73882

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)

"See Attached" The north 80 feet of the South 235 feet of the West 2.5 acres of the East 7.5 acres of the North 1/2 of the N.W. 1/4 of the NW 1/4 of Section 32, Township 34 North, Range 4 East W.M. Except portion thereof as condemned by the State of Washington for highway purposes by decree entered in Skagit County Superior Court Cause No. 32799 on March. 25, 1973

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

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 equal access to its services. If you need special accommodation



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