



200312310053
Skagit County Auditor

RETURN ADDRESS

12/31/2003 Page 1 of 2 9:33AM

200310290133
Skagit County Auditor

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First American Title
160 Cascade Pl. #104
Burlington WA 98233
B-71594

*re-record to correct name spelling

STATE OF WASHINGTON
Department of
Licensing
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)

1 MANUFACTURED HOME WAFL 33 118 156 413

TPD / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	2003	Aetwood	68 X 28	WAFL331A1918156-413

2 LAND LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER 5027-000-001-0300

LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
Ptn 41		Sunset Add	P11927

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
M		

NAME OF REGISTERED OWNER Michael Loudon DOL CUSTOMER ACCOUNT NUMBER L0420MA29403

NAME OF ADDITIONAL REGISTERED OWNER Nathie Loudon DOL CUSTOMER ACCOUNT NUMBER LARRAKL36248

ADDRESS 13281 Rockhurst Mt. Vernon WA 98273

NAME OF LEGAL OWNER GCH Savings Bank DOL CUSTOMER ACCOUNT NUMBER

NAME OF ADDITIONAL LEGAL OWNER 6505 218th St. SW Mt Lake Terrace WA 98043

GRANTEE
NAME Same as registered owners

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 Michael Loudon by Cathy, Jeff POA as agent
Signature of Additional Registered Owner and Title, IF APPLICABLE Nathie Loudon by Cathy, Jeff POA as agent

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skagit Signed or attested before me on 10/29/03

by Cathy Jeff, Agent, POA Signature: Cathy Jeff
PRINT NAME OF REGISTERED OWNER

by Cathy Jeff, Agent, POA Signature: Cathy Jeff
PRINT NAME OF REGISTERED OWNER

Signature: Kacie Chickok
PRINTED NAME OF NOTARY

County/Office No. OR Dealer No. OR Notary Expiration Date 1-7-07

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 #

TISH CAMPBELL SKAGIT COUNTY PERMIT CENTER 360/366-9400 BP 03-02605

SIGNATURE / POSITION DATE Tish Campbell Permit Technician 10/29/03

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 Laurie Sullivan

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>10-24-03</u>
by <u>Golf Savings Bank</u> PRINT NAME OF LEGAL OWNER		Signature <u>[Signature]</u> NOTARY OR AGENT
by <u>Laurie Sullivan, VP</u> PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY <u>Cathy Taffel</u>
Title <u>Golf Savings Bank</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR <u>11-1403</u> Dealer No. OR Notary Expiration Date

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

Lot 2, Short Plat No. PL 000348 recorded May 6 2002 under Auditor's File No. 2002 05060132 Approved May 2, 2002 being a portion of Lot 1, Sunset Acres, 43 Clearlake, according to the plat thereof and recorded in Volume 4 of Plats, Page 3, together with an easement for ingress egress and utilities depicted as Parkwest Lane on the face of said Short Plat.

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) <u>COACH CORRAL INC</u>	WA DEALER NUMBER <u>4278</u>	DATE OF SALE <u>5-16-03</u>
PURCHASE PRICE <u>77500-</u>	TAX JURISDICTION/TAX RATE <u>7.6</u>	DEALER'S AUTHORIZED SIGNATURE <u>Linda Milbourn</u>

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) <u>RODRIGO ANGULO</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>2901-02</u>
SIGNATURE <u>[Signature]</u>	DATE <u>10-29-03</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
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