

## RETURN ADDRESS

Lynnwood Escrow Corp

P.O. Box 5857

Lynnwood, WA. 98046

ESC. # 20031522



200401090081

Skagit County Auditor

1/9/2004 Page 1 of 2 2:15PM

		<b>MANUFACTURED HOME APPLICATION</b>		<b>PLEASE CHECK ONE</b>	
				<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)					
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	04	FLTW	56 X 28	ORFL34829511B913	
<b>2 LAND</b>					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 350525-3-004-0021 P46172					
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
3		SP 12-85			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		1		
NAME OF REGISTERED OWNER					
Sandra K. Wiens					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS					
29167 S. Skagit Hwy, Sedro Woolley, WA 98284					
CITY STATE ZIP CODE					
NAME OF LEGAL OWNER					
Wells Savings Bank					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS					
P.O. Box 5010, Lynnwood, WA 98046					
CITY STATE ZIP CODE					
<b>GRANTEE</b>					
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 <i>Sandra K. Wiens</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of Skagit					
Signed or attested before me on 9/4/03					
Signature <i>Sandra K. Wiens</i>					
PRINT NAME OF REGISTERED OWNER					
Signature <i>Robyn L. Mixer</i>					
PRINTED NAME OF NOTARY					
County/Office No. OR					
Dealer No. OR					
Notary Expiration Date 5/9/07					
Title Notary					
DEALERSHIP POSITION/AGENT/NOTARY					
<b>4 TITLE COMPANY CERTIFICATION</b>					
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.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
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 #					
Elaine Pitman SKAGIT COUNTY PERMIT CENTER BP03-0637					
SIGNATURE / POSITION					
DATE					
Elaine Pitman 1-6-04					

**6 SIGNATURE OF LEGAL OWNER**

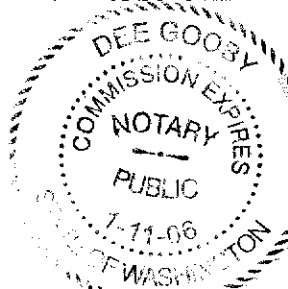
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

*Dee Gooby Sr VP*

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 *Snohomish*Signed or attested  
before me on *9-30-03*by *Nancy Fontaine, SRP*  
PRINT NAME OF LEGAL OWNERSignature *Dee Gooby*  
NOTARY OR AGENTby *GOODY SAVING BANK*  
PRINT NAME OF LEGAL OWNERPRINTED NAME OF NOTARY *DEE GOOBY*Title *NOTARY*  
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR  
Dealer No. OR *1-11-06*  
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

Lot 3 of Skagit County Short Plat No. 12-85, approved December 26, 1985, recorded December 31, 1985, under Auditor's File No. 8512310002 in Volume 7 of Short Plats, page 62, records of Skagit County, Washington, being a portion of the Southwest 1/4 of the Southwest 1/4 of Section 25, Township 35 North, Range 5 East, W.M.; TOGETHER WITH a non-exclusive walk-in easement across lots 1 and 2 of said Short Plat along the approximate path of a roadway existing on October 3, 1989, for access to that portion of Lot 3, lying North of a pond.

**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

*9-30-03*

PURCHASE PRICE

*61892-*

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)

*Rodriguez Angulo*

COUNTY OFFICE/VFS OPERATOR NUMBER

*2901-02*

SIGNATURE

*[Signature]*

DATE

*01-09-04***10 TITLE FEES**

FILING FEE

APPLICATION

MOBILE HOME FEE

ELIMINATION FEE

USE TAX

SUBAGENT FEES

TOTAL FEES &amp; 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



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