

RETURN ADDRESS

Land Title Company

2801 Commercial Avenue, Suite #2

Anacortes, WA 98221



200401200005

Skagit County Auditor

1/20/2004 Page

1 of

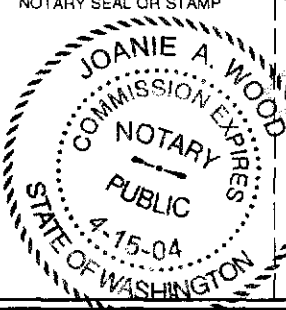
2 8:52AM

LAND TITLE OF SKAGIT COUNTY

		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)	
	1991	OAKMA	40 X 24	06910494DAB	
2 LAND					
LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER P59519-3822-000-111-0006					
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
111		Skyline No. 6			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	(1)		(1)		
NAME OF REGISTERED OWNER APRIL L. ROLPH					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
2319 Twin Place		Anacortes	WA	98221	
NAME OF LEGAL OWNER Wells Fargo Home Mortgage					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
1010 S.E. Everett Mall Way		Everett	WA	98208	
GRANTEE					
NAME Same as Grantor					
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 April L. Rolph					
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 9/15/03 Signature of NOTARY OF AGENT Lisa J. Richards PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR 7/9/04 Notary Expiration Date			
PRINT NAME OF REGISTERED OWNER Notary		PRINT NAME OF REGISTERED OWNER April L. Rolph			
Title Notary		Title April L. Rolph			
DEALERSHIP POSITION/AGENT/NOTARY		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 checked="" 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 #	
Larry Andrews		City of ANACORTES 360 293-1901		BLD-2003-91	
SIGNATURE / POSITION		DATE		DATE	
Ray Cushman		11/12/03		95	

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 Cindy Clements, authorized signatory
Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>SNOHOMISH</u>	Signed or attested before me on <u>12-31-03</u>
	<u>CINDY CLEMENTS</u> PRINT NAME OF LEGAL OWNER	Signature <u>Joanie Wood</u> NOTARY OR AGENT
	by <u>JOANIE WOOD</u> PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY
	Title _____	AND: County/Office No. OR Dealer No. OR Notary Expiration Date _____
	DEALERSHIP POSITION/AGENT/NOTARY _____	

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

Lot 111, "SKYLINE NO. 6," as per plat recorded in Volume 9 of Plats, pages 64 through 67A, inclusive, records of Skagit County, Washington.
Situate in the City of Anacortes, County of Skagit, State of Washington.

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	
<input type="checkbox"/> 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>Federigo Angulo</u>	COUNTY OFFICE/VES OPERATOR NUMBER <u>2901-02</u>
SIGNATURE <u>[Signature]</u>	DATE <u>01-20-04</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 policy of providing equal access to its services. If you need special accommodation, please

