



200402250047

Skagit County Auditor

2/25/2004 Page

1 of

2 9:24AM

RETURN ADDRESS

First American Title
160 Cascade Pl. #104
Burlington, WA 98233

B 74762

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

TPO / PLATE NUMBER 90129995 YEAR 1995 MAKE Skyline LENGTH/WIDTH(FEET) 66 X 28 VEHICLE IDENTIFICATION NUMBER (VIN) 809110717HAB

2 LAND

LEGAL DESCRIPTION ON PAGE 2

MANUFACTURED HOME WILL BE [X] AFFIXED [] REMOVED

REAL PROPERTY TAX PARCEL NUMBER 350508-1-005-0108 P58674

LOT BLOCK PLAT NAME OR SECTION/TOWNSHIP/RANGE QUARTER/QUARTER SECTION 830-5

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS

NAME OF REGISTERED OWNER Mark R Mulholland DOL CUSTOMER ACCOUNT NUMBER MULHOMRHTSC

NAME OF ADDITIONAL REGISTERED OWNER Karla J Mulholland DOL CUSTOMER ACCOUNT NUMBER MULHOKJ422DM

ADDRESS 7265 Cokedale Ln. Sedro Woolley WA 98284 CITY STATE ZIP CODE

NAME OF LEGAL OWNER Long Beach Mortgage DOL CUSTOMER ACCOUNT NUMBER

NAME OF ADDITIONAL LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER

ADDRESS 4160 Dublin Blvd, Ste 400 Dublin WA 97228 CITY STATE ZIP CODE

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 Mark R. Mulholland

Signature of Additional Registered Owner and Title, IF APPLICABLE Karla J. Mulholland

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of Skagit Signed or attested before me on 5/21/03

by Mark R Mulholland Signature NOTARY OR AGENT

by Karla J. Mulholland PRINTED NAME OF REGISTERED OWNER NOTARY OR AGENT Cathy Toft

PRINTED NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY Title AND: County/Office No. OR Dealer No. OR Notary Expiration Date 11/1/03

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: [X] 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 # Elaine Pitman 360 336-9410 950010

SIGNATURE / POSITION DATE Elaine Pitman Support Services 2-13-04

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If you need special accommodation

The Department of Licensing has a policy of providing equal access to its services

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

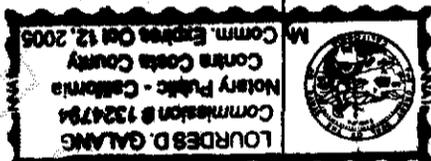
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)
 Tract 1 of Skagit County Swat Plat No. 101-80 approved July 14 1981 recorded July 14 1981 in book 5 of Swat plats, page 101- under Auditor's File No. 816740010, being a portion of the southwest 1/4 of the northeast 1/4 section of Township 35 North Range 5 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

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/AGENTS OPERATOR NUMBER
 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.



State of Washington
 County of Skagit
 Signed or attested before me on 10/29/03
 Signature of Notary Agent
 Signature of Legal Owner
 PRINTED NAME OF LEGAL OWNER
 PRINTED NAME OF NOTARY
 County/Office No. OR Dealer No. OR
 AND: Notary Expiration Date 10/29/05
 DEALERSHIP POSITION/AGENCY (NOTARY)

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE