

RETURN ADDRESS

FIRST AMERICAN TITLE CO.

P.O. Box 1667

1301-B Riverside Drive
Mt. Vernon, WA 98273200402250086
Skagit County Auditor

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3 11:25AM

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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	2002	Palm	44X 28	PH205244A

2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
330421-0-027-0001

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
			21-33-4

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

Joseph Andrew Bock

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS

26523 North English Rd Mt Vernon WA 98274

NAME OF LEGAL OWNER

Same As Registered

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS

CITY STATE ZIP CODE

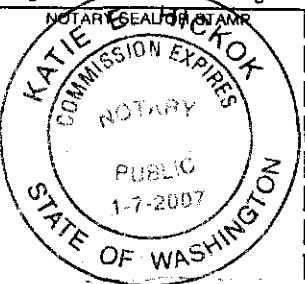
GRANTEE

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 X

Signature of Additional Registered Owner and Title, IF APPLICABLE



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of SkagitSigned or attested
before me on 6-12-03by Joseph Andrew Bock
PRINT NAME OF REGISTERED OWNERSignature
NOTARY OR AGENTby
PRINT NAME OF REGISTERED OWNERKatie E Hickok
PRINTED NAME OF NOTARYTitle Notary
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR 1-7-07
Notary Expiration Date

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 #

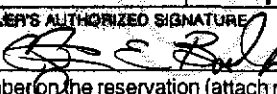
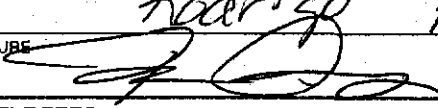
BLDG PERMIT #

TISH CAMPBELL SKAGIT COUNTY PERMIT CENTER 360/346-9410 BP03-0493

SIGNATURE / POSITION

DATE

Tish Campbell, Permit Technician 02/24/04

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 _____					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington _____ Signed or attested before me on _____ County of _____ by _____ Signature _____ PRINT NAME OF LEGAL OWNER NOTARY OR AGENT by _____ PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY Title _____ AND: County/Office No. OR DEALERSHIP POSITION/AGENT/NOTARY 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 Legal Description					
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) Palm Harbor Village			WA DEALER NUMBER 4511	DATE OF SALE 6/6/03	
PURCHASE PRICE 87105.72	TAX JURISDICTION/TAX RATE Skagit 7.6%	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) Rodrigo Angulo			COUNTY OFFICE/VFS OPERATOR NUMBER 2901-02		
SIGNATURE 			DATE 02/25/04		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>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.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>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.</p> </div> <p>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.</p>					

The Department of Licenses
If you need special accom



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Schedule "C"

The land referred to in this report/policy is situated in the State of Washington, County of Skagit, and is described as follows:

That portion of the Southwest 1/4 of the Northeast 1/4 of Section 21, Township 33 North, Range 4 East, W.M., described as follows:

Beginning at a point which lies North 0 degrees 34' 23" East 724.04 feet along the North-South center line of said Section and South 79 degrees 18' 50" East 165.92 feet from the center of said Section 21; thence North 10 degrees 41' 10" East 100.0 feet; thence South 79 degrees 18' 50" East 100.0 feet; thence South 10 degrees 41' 10" West 100 feet; thence North 79 degrees 18' 50" West 100.0 feet to the point of beginning.



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