

RETURN ADDRESS

Land Title Co. of Skagit

PO Box 445

Burlington, WA 98233

#PA-102602-E



200402270118

Skagit County Auditor

2/27/2004 Page

1 of

2 11:22AM

LAND TITLE OF SKAGIT COUNTY

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 +112139	YEAR 1997	MAKE Silvcrest	LENGTH/WIDTH(FEET) 60 X24	VEHICLE IDENTIFICATION NUMBER (VIN) 17710059A
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2 LAND

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
P64073

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
Armstrong, Dolores

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS 8217 cedar Grove Avenue	CITY Concrete	STATE WA	ZIP CODE 98237
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NAME OF LEGAL OWNER
Wells Fargo Home Mortgage, Inc.

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS P.O. Box 10304	CITY Des Moines	STATE IA	ZIP CODE 50306-0304
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GRANTEE

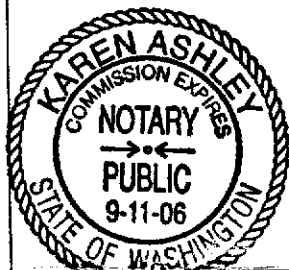
NAME

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

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 SkagitSigned or attested
before me on 2-12-03by Dolores Armstrong
PRINT NAME OF REGISTERED OWNERSignature Karen Ashley
NOTARY OR AGENTby
PRINT NAME OF REGISTERED OWNERKaren Ashley
PRINTED NAME OF NOTARYTitle
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR 9/11/06
Dealer No. OR
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 #

SIGNATURE / POSITION

SKAGIT COUNTY PERMIT CENTER 360/536-9410

96-1432

DATE

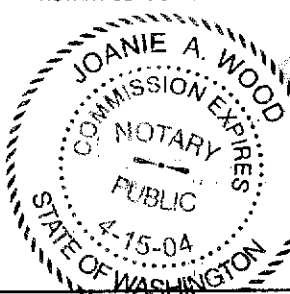
6 SIGNATURE OF LEGAL OWNER

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

Signature of Legal Owner and Title, IF APPLICABLE VP Loan documents

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 SNOWHOMISHSigned or attested
before me on 2/13/04by ALVIN Y. WONG
PRINT NAME OF LEGAL OWNERSignature Joanie A. Wood
NOTARY OR AGENTby _____
PRINT NAME OF LEGAL OWNERPRINTED NAME OF NOTARY
JOANIE A. WOODTitle _____
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
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)Lot 12, "CEDARGROVE ON THE SKAGIT", as per plat recorded in Volume 9 of
plats, pages 48 through 51, inclusive, records of Skagit County, 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 _____

☐ 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 2901-02SIGNATURE [Signature] DATE 02-27-04**10 TITLE FEES**

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					<u>3.00</u>
					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, p200402270118
Skagit County Auditor