



200403110135

Skagit County Auditor

3/11/2004 Page

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3 3:48PM

## RETURN ADDRESS

Chicago Title Company

P. O. Box 670

Burlington, WA 98233

CHICAGO TITLE C30044 ✓

STATE OF WASHINGTON Department of <b>Licensing</b>		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)					
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
7058031	1993	ELTWD	40 X 66	WAFLN3111057BA	
<b>2 LAND</b> LEGAL DESCRIPTION ON PAGE 3					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 3882-000-024-0000 P112738	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
		Tract 24, Plat of Cheastys Big Lake Tracts			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b> ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		0		
NAME OF REGISTERED OWNER COACH CORRAL INC					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS	CITY		STATE	ZIP CODE	
377 S. Burlington Blvd	Burlington		WA	98233	
NAME OF LEGAL OWNER same					
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: COACH CORRAL INC					
Signature of Registered Owner and Title, IF APPLICABLE by: <u>Keith Padgett</u> owner					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on 3/10/04	
		County of Skagit			
		by Keith Padgett		Signature Marcia J. Jennings	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by		PRINTED NAME OF NOTARY	
		Title notary		County/Office No. OR 10/5/2004	
		DEALERSHIP POSITION/AGENT/NOTARY		AND: Dealer No. OR Notary Expiration Date	
<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 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 # 336-9410		BLDG PERMIT #	
Elaine Pitman		SKAGIT COUNTY PERMIT CENTER		BP02-1420	
SIGNATURE / POSITION		DATE			
Elaine Pitman Support Services		3-11-04			

**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  
County of \_\_\_\_\_Signed or attested  
before me on \_\_\_\_\_by \_\_\_\_\_  
PRINT NAME OF LEGAL OWNERSignature \_\_\_\_\_  
NOTARY OR AGENTby \_\_\_\_\_  
PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title \_\_\_\_\_  
DEALERSHIP POSITION/AGENT/NOTARY**AND:** 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)**

A portion of Tract 24, PLAT OF CHEASTYS BIG LAKE TRACTS as more fully described on form TD-429-732 Attachment.

**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)

COUNTY OFFICE VEHICLE OPERATOR NUMBER

SIGNATURE

DATE

**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 policy of providing equal access to its services.  
If you need special accommodation200403110135  
Skagit County Auditor



MANUFACTURED HOME APPLICATION - ADDITIONAL ATTACHMENT  
**LEGAL DESCRIPTION OF LAND**

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

Check type of application: ☒ Title Elimination  
☐ Removal From Real Property  
☐ Transfer In Location

Land: Property Tax Parcel Number 3882-000-024-0000 P112738

Legal Description:

PARCEL A:

Tract 24, PLAT OF CHEASTYS BIG LAKE TRACTS, according to the plat thereof recorded in Volume 4 of Plats, page 49, records of Skagit County, Washington;

EXCEPT that portion described as follows:

Beginning at the Southwest corner of said Lot 24;  
thence Northwesterly along the Southwesterly line thereof to a point on the Northwesterly line of the Southeasterly 12 feet of said lot, said point being the true point of beginning;  
thence Northeasterly along said Northwesterly line a distance of 57 feet;  
thence Northwesterly parallel with the Southwesterly line of said lot a distance of 55.6 feet, more or less, to the Northwesterly line of said lot;  
thence Southwesterly along said Northwesterly line to the Northwest corner of said lot;  
thence Southeasterly along the Southwesterly line of said lot to the true point of beginning.

Situated in Skagit County, Washington.

PARCEL B:

An easement for ingress and egress over and across the Southeasterly 8 feet of that portion of Tract 24, PLAT OF CHEASTYS BIG LAKE TRACTS, according to the plat thereof recorded in Volume 4 of Plats, page 49, records of Skagit County, Washington, described as follows:

Beginning at the Southwest corner of said Lot 24;  
thence Northwesterly along the Southwesterly line thereof to a point on the Northwesterly line of the Southeasterly 12 feet of said lot, said point being the true point of beginning;  
thence Northeasterly along said Northwesterly line a distance of 57 feet;  
thence Northwesterly parallel with the Southwesterly line of said lot a distance of 55.6 feet, more or less, to the Northwesterly line of said lot;  
thence Southwesterly along said Northwesterly line to the Northwest corner of said lot;  
thence Southeasterly along the Southwesterly line of said lot to the true point of beginning.

ALL Situated in Skagit County, Washington.



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## OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK TYPE OF APPLICATION: ☐ Title Elimination  
☐ Removal From Real Property  
☐ Transfer In Location.

PROPERTY TAX PARCEL NUMBER:

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:	
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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)	
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:	
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARY SEAL OR STAMP	
NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
State of Washington County of _____	Signed or attested before me on _____
by _____ Printed Name of Applicant	Signature _____
Title _____ DEALERSHIP Position/Agent/NOTARY	Dealer No. OR AND: County/Office No. OR Notary Expiration Date _____

The Department of Licensing has a policy of providing equal access to its services.  
If you need special accommodation, please call (360) 902-3600 or TDD (360) 664-8885.