

RETURN ADDRESS

Wells Fargo Escrow
 1509A Riverside Drive
 Mount Vernon, WA 98273
 Escrow # 04-01002-03



200405270008
 Skagit County Auditor

5/27/2004 Page 1 of 2 8:57AM

LAND TITLE OF SKAGIT COUNTY 107261P

		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)	
	2004	Palm Harb	13'8 X 68'0	ORE 0000447894,5,6	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 360235-1-005-0701	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
see reverse page for legal description					
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
29	2		1		
NAME OF REGISTERED OWNER					
Wendy A. Albright					
NAME OF ADDITIONAL REGISTERED OWNER					
Mark A. Blau					
ADDRESS		CITY	STATE	ZIP CODE	
10790 Halloran Road		Bow	WA	98232	
NAME OF LEGAL OWNER					
Wells Fargo Home Mortgage					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
1 Home Campus		Des Moines	IA	50328	
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 <i>Wendy A. Albright</i> Wendy A. Albright					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Mark A. Blau</i> Mark A. Blau					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
		State of Washington County of Skagit		Signed or attested before me on March 24, 2004	
		by Wendy A. Albright PRINT NAME OF REGISTERED OWNER		Signature <i>Kelli A. Mayo</i> NOTARY OR AGENT	
		by Mark A. Blau PRINT NAME OF REGISTERED OWNER		Kelli A. Mayo PRINTED NAME OF NOTARY	
		Title Notary Public DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 6-19-05 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: <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 #	
Georgine Rosson		SKAGIT COUNTY PERMIT CENTER 336-9410		BP03-0530	
SIGNATURE / POSITION		DATE		DATE	
<i>Georgine Rosson</i> Permit Tech		5/18/04		5/18/04	

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 Diane Martin Bmt II
Diane Martin, Manager

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>3-29-04</u>
	by <u>Diane Martin for Wells</u> PRINT NAME OF LEGAL OWNER <u>Fargo Home Mortgage</u>	Signature <u>Twana S. Rippel</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>Twana S. Rippel</u>
Title <u>Notary Public</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR <u>4-2-07</u> Notary Expiration Date	

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

Tract D, Short Plat No. 44-75, approved August 17, 1979, in Book 3 of Short Plats, recorded August 17, 1979, Page 162 under Auditor's File No. 9708170005, and being a portion of the Northeast 1/4 of the Northeast 1/4 of Section 35, Township 36 North, Range 2 East, W.M.

Situate in the 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) <u>Palm Harbor Village</u>	WA DEALER NUMBER <u>4511</u>	DATE OF SALE <u>8/8/03</u>
PURCHASE PRICE <u>119,500.00</u>	TAX JURISDICTION/TAX RATE <u>Skagit 7.6%</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>
<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>PEGGY A. RIEDELL-GRAHAM</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-04</u>
SIGNATURE <u>[Signature]</u>	DATE <u>5/27/04</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
If you need special accommodation



Skagit County Auditor