

RETURN ADDRESS



200410050114  
Skagit County Auditor

10/5/2004 Page 1 of 2 3:36PM

CHICAGO TITLE IC31979 ✓

**STATE OF WASHINGTON**  
Department of  
**Licensing**

## 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 &240504	YEAR 2001	MAKE LIB	LENGTH/WIDTH(FEET) 48 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 09L34337XU
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**2 LAND** LEGAL DESCRIPTION ON PAGE \_\_\_\_\_

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER 4795-000-002-0000

LOT 2	BLOCK	PLAT NAME CEDAR PARK PLAT	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  
**Daniel J. Smith**

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS 45034 Cedar Street	CITY Concrete	STATE WA	ZIP CODE 98237
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NAME OF LEGAL OWNER  
**Pacific Republic Mortgage**

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS 4800 SW Griffith Drive, Suite 120	CITY Beaverton	STATE OR	ZIP CODE 98005
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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 Daniel J. Smith

Signature of Additional Registered Owner and Title, IF APPLICABLE

	<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>Aug 30, 2004</u>
	by <u>Daniel J. Smith</u> PRINT NAME OF REGISTERED OWNER	Signature <u>Maryanne Meyer</u> NOTARY OF AGENT
	by _____ PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY <u>Mary Anne Meyer</u>
Title <u>notary</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No: <u>OR</u> Dealer No. <u>OR 3-5-05</u> 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) <u>JA McCORMICK</u>	BLDG PERMIT OFFICE/PHONE # <u>360-853-8401</u>	BLDG PERMIT # <u>02-046</u>
SIGNATURE / POSITION <u>JA McCORMICK</u> BUILDING OFFICIAL	DATE <u>9-10-04</u>	

**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]*  
MICHAEL C. HAWKS, Vice President

Signature of Additional Legal Owner and Title, IF APPLICABLE

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**



CAROL D ECKERSLEY  
NOTARY PUBLIC - OREGON  
COMMISSION NO. 357365  
MY COMMISSION EXPIRES MAY 1, 2006  
State of Oregon  
County of Washington

Signed or attested before me on 8/31/04

by Michael C. Hawks  
PRINT NAME OF LEGAL OWNER

Signature *[Signature]*  
NOTARY OR AGENT

by  
PRINT NAME OF LEGAL OWNER

Carol D. Eckersley  
PRINTED NAME OF NOTARY

Title Vice President  
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR  
Dealer No. OR  
Notary Expiration Date 5/1/06

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

Lot 2, CEDAR PARK PLAT, according to the plat thereof, recorded June 5, 2002 under Auditor's File n0. 200206050104, records of Skagit County, Washington.  
Situating in 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) <i>Peggy A. Riedell Graham</i>	COUNTY OFFICE/VES OPERATOR NUMBER 29-01-04
SIGNATURE <i>[Signature]</i>	DATE 10/5/04

**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 Licen  
If you need special accor



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