

RETURN ADDRESS

10/13/2004 Page 1 of 2 3:18PM

PHOENIX SAVINGS BANK	
3500 188TH STREET S.W.	#102
LYNNWOOD WA 98037	

CHICAGO TITLE	00 14.01.010	
	CO. 1626812	DI FASE CUECK ONE
STATE OF WASHINGTON Department of	MANUFACTURED HO APPLICATION	MITTLE ELIMINATION ☐TRANSFER IN LOCATION
Invone who knowingly makes	a false statement of a material fact is gui	Ity REMOVAL FROM REAL PROPERTY ent, or both. (RCW 46.12.210)
MANUFACTUREDHOME		
PD / PLANE NUMBER YEAR	MAKE LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN) GOOR-23N27007
2 LAND	LEGAL	DESCRIPTION ON PAGE
MANUFACTURED HOME WILL		REAL PROPERTY TAX PARCEL NUMBER 360420-2-009-0200
Lot 1	SKAGIT COUNTY SHORT	SECTION/TOWNSHIP/RANGE PLAT NO. 02-0085
GRANTOR(S) REGISTERE	The state of the s	IONAL NAMES ON PAGE
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
29 NAME OF REGISTERED OWNER	2	1
MEDEIROS, RYAN C.		
NAME OF ADDITIONAL REGISTERED OF MEDEIROS, KRISTEN A		
ADDRESS	CITY	STATE ZIP CODE
3395 OLD HWY 99 ROA	AD N. BURLINGTON	WA 98233
NAME OF LEGAL OWNER PHOENIC SAVINGS BA	NK	
NAME OF ADDITIONAL LEGAL OWNER	Salar and the sa	
ADDRESS	S.W. #102 LYNNWOOD	STATE ZIP CODE WA 98037
3500 188TH STREET	S.W. #102 LINNWOOD	WA 98037
RANTEE	<del></del>	
I DO SOLEMNLY ATTEST UND VEHICLE AND THIS INFORMA	TION IS ACCURATE:	AM/ARE THE REGISTERED OWNER(S) OF THIS
Signature of Register	ed Owner and Title, IF APPLICABLE	cons
Signature of Additional Register	ed Owner and Title, IF APPLICABLE	vistan a Mederia
NOTANY SEAL DESTAND		N FOR REGISTERED OWNER(S) SIGNATURE
The story of the	State of Washington County of Skagit	Signed or attested before me on 7/2/2003
S NOTAR, 3:01	County of Skagit	Man de Com
ON PUBLIC S	by Ryan C. Medeiros PRINT NAME OF REGISTERED OWNER	Signature NOTARY OR AGENT
5.04 60 = 1	by Kristen A. Medeiros PRINT NAME OF REGISTERED OWNER	Marcia J. Jennings PRINTED NAME OF NOTARY
11 Sale 1800 -	Title Notary Public	County/Office No: OR 10/5/2004 Dealer No. OR 10/5/2004
4 TITLE COMPANY CERTIFIC	DEALERSHIP POSITION/AGENT/NOTARY	Notary Expiration Date
certify that the legal description	of the land and ownership is true and correc	ot 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	s of the date Title Company Representative signs.
5 BUILDING PERMIT OFFICE	CERTIFICATION	
I certify that: \( \bigcirc \text{the man} \\ \pi \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		nd the attachment will be inspected upon completion
NAME (TYPED OR PRINTED)	BLDG PERMIT OFFICE/PHON SKAGIT COUNTY PERMIT CENTER	E# BLDG PERMIT #
SIGNATURE / POSITION	101/2	DATE
0-420-729 MANUF HOME APPL (R/8/98)	Of Page 1 of 2	manua 14/11/04

C SIGNATURE OF LEAST	NAMED		· · ·			
6 SIGNATURE OF LEGAL O						
SIGNATURE OF LEGAL OWN	NER INDICATES CONSENT FOR	RELIMINATION OF Phaem (X Sev)	TITLE (REMOVAL F	ROM REAL PROPERTY.		
	wner and Title, IF APPLICABLE		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	lanager		
Signature of Additional Legal O	wher and Title, IF APPLICABLE		· · · · · · · · · · · · · · · · · · ·			
NOTARY SEAL OR STAMP	NOTARIZATION/C	ERTIFICATION FO	R LEGAL OWNER(S)	SIGNATURĘ		
LAJ CAROLL	State of Washington	homish	Signed or attested	7/2/03		
- NO N. SSION 61. 10 N.			before me on	2 3/0 -		
MINOTARL	Proceix Savings	ester		10.08		
S	by by Geot Hey M. N.	SICV	NOTARY OF AC	GENT		
O. PUBLIC A	by		Thyla T	Carnoll		
03.29-01	PAINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTAR	Y		
WASHING LE	Title Notary		County/Off AND: Dea	iler No. OR		
WILLIAM MASKING	DEALERSHIP POSITION/AGENTA	YRATO	Notary Exp	ration Date 3/29/07		
	egal description of the land can					
	OUNTY SHORT PLAT NO.					
	st 21, 2002, under					
	Washington and being					
	NO.30-89, approved of Short Plats, pag					
	ds of SKagit County,					
	of the Northeast Qu					
	of Section 20, Town					
Willamette Meridi						
8 DEALER'S REPORT OF S						
	RMATION IS CORRECT. THE VI	HICLE IS CLEAR	OF ENCUMBRANCES	EXCEPT AS SHOWN		
ANY REQUIRED SALES TA	X HAS BEEN COLLECTED.	The second section of				
DEALER NAME (TYPED OR PRINTED)		/ WA C	EALER NUMBER	DATE OF SALE		
	ile Homes Inc.		416	6/20/03		
PURCHASE PRICE TAX JURISDICTION/TAX RATE DEALERS AUTHORIZED SIGNATURE						
	Sale to a Certified Tribal member or	the reservation (att	ach notarized statemer	at of delivery)		
				it 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.	apposit to rear a past to triplatous	orroom, and and app				
NAME (TYSED OR PRINTED)	- Onn	COUI	NTY OFFICE/VFS OPERATO	R NUMPER		
FEGO Y A. T	KIEDELL-GRA	MAM	29-01-0	941		
SIGNATURE	J. 000 0 M.	chacul		DATE O/12 /m/		
- Caa	Leedel the	enem	<u> </u>	1910/04		
FILING FEE APPLICATION	ON MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES		
A PEIGATE	SIN MODICE FIGNIE FEE	CCIMINATION FEE	USE TAX	OUDAGENI FEES		
				TOTAL FEES & TAX		
			4			
				And the state of t		
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.						
		<u> </u>				
APPLICANTS:						
	Manufactured Home Appl licensing subagents charg		ı requirea tees. Ver	iicie		

The Department of Licensing has  $\varepsilon$ If you need special accommodatio

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.

