

## RETURN ADDRESS

First American Title Company

3202 Commercial Ave.

Anacortes, WA 98221

A82632



200410150153

Skagit County Auditor

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		<b>MANUFACTURED HOME APPLICATION</b>		<b>PLEASE CHECK ONE</b> <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)	
2065784	1995	Liberty	28X48	09L29911XU	
<b>2 LAND</b>					
LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 4101-009-014-0005/P73023					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
8-14	9	Fidalgo City			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		1		
NAME OF REGISTERED OWNER JEFFREY A. REED					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL REGISTERED OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS 41304 300th PL NE City Arlington STATE WA ZIP CODE 98223					
NAME OF LEGAL OWNER JEFFREY A. REED					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL LEGAL OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS 41304 300th PL NE City Arlington STATE WA ZIP CODE 98223					
<b>GRANTEE</b>					
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>Jeffrey A. Reed</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
		<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>			
State of Washington County of Snohomish		Signed or attested before me on 10/20/2004			
by Jeffrey A Reed PRINT NAME OF REGISTERED OWNER		Signature <i>Susan Woody</i> NOTARY OR AGENT			
by _____ PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY SUSAN WOODY			
Title _____ DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 10/10/2005			
<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) Tamara A. Satko			TITLE COMPANY / PHONE NUMBER First American Title Company 360-293-5423		
SIGNATURE / POSITION <i>Tamara A. Satko</i>			DATE 10/5/04		
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) Georgine Rossen			BLDG PERMIT OFFICE/PHONE # SKAGIT COUNTY PERMIT CENTER 360-9410		BLDG PERMIT # 95-0938
SIGNATURE / POSITION <i>Georgine Rossen</i> Permit Technician			DATE 10/13/04		

**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

	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>	
	State of Washington County of <u>Snohomish</u>	Signed or attested before me on <u>09-20-2004</u>
	by <u>Jeffrey A. Reed</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by <u>Susan Woody</u> PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY
Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR <u>91205</u> Notary Expiration Date

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

Lots 8 through 14, inclusive, Block 9 MAP OF FIDALGO CITY, According to the Plat thereof, recorded in Volume 2 of plats, page 113, records of Skagit County, Washington

TOGETHER WITH the East 1/2 of Oliver Avenue, the North 1/2 of 10th Street and the West 1/2 of the alley in said Block 9, as set forth in agreed Judgment Quieting Title under Skagit County Superior Court Cause No. 91-2-00549-7 and recorded 11/11/1999 under Auditor's File No. 9111010074, as would attach by operation of law.

**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) <u>Karrie McCrea</u>	COUNTY OFFICE OPERATOR NUMBER <u>2901-21</u>
SIGNATURE <u>Karrie McCrea</u>	DATE <u>10/14/04</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  
If you need special accomm.



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