

## RETURN ADDRESS

FIRST AMERICAN TITLE

2917 Pacific Ave

Everett, WA 98201

384145 K<sup>th</sup>

Site 4614 Yorkshire Dr.



200411080181

Skagit County Auditor

11/8/2004 Page

1 of

2 1:47PM

STATE OF WASHINGTON Department of <b>Licensing</b>		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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)				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2005	Oakwood	56 X 27	G00R23 N28288 AR	
<b>2 LAND</b>					
MANUFACTURED HOME WILL BE			LEGAL DESCRIPTION ON PAGE		
<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER		
			38220000620005 P59456		
LOT	BLOCK	PLAT NAME		SECTION/TOWNSHIP/RANGE	
62		Skyline 6			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		1		1	
NAME OF REGISTERED OWNER					
RENE SOMMER					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS		CITY		STATE ZIP CODE	
4614 Yorkshire Dr		Anacortes		WA 98221	
NAME OF LEGAL OWNER					
GOLF SAVINGS BANK					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY		STATE ZIP CODE	
6505 218th ST SW Suite 15		Mountlake Terrace		WA 98046	
<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>Rene Sommer</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Snohomish Signed or attested before me on 7-9-04 Signature <i>Kathy Huber</i> PRINT NAME OF REGISTERED OWNER Rene Sommer PRINT NAME OF REGISTERED OWNER Notary Title Notary DEALERSHIP POSITION/AGENT/NOTARY PRINTED NAME OF NOTARY Kathy Huber AND: County/Office No. OR 4-17-08 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 checked="" 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 #	
Larry Andrews		(360) 293-1901		BLD 2004-9731	
SIGNATURE / POSITION				DATE	
<i>Larry Andrews</i> Inspector				9/16/04	

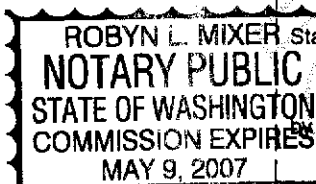
**6 SIGNATURE OF LEGAL OWNER**

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 SnohomishSigned or attested  
before me on 11/3/04PRINT NAME OF LEGAL OWNER  
David S PearsonSignature Robyn MixerPRINT NAME OF LEGAL OWNER  
Golf Savings BankNOTARY OR AGENT  
Robyn MixerTitle  
NotaryAND: County/Office No. OR  
Dealer No. OR  
Notary Expiration Date 5/9/07

DEALERSHIP POSITION/AGENT/NOTARY

**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**Lot 62, SKYLINE NO. 6, as recorded in Volume 9 of Plats, page 64  
through 67A, REcords of Skagit County, Washington.4614 yorkshire**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)

OAKWOOD HOMES

WA DEALER NUMBER

4110

DATE OF SALE

4/14/04

PURCHASE PRICE

68,951.00

TAX JURISDICTION/TAX RATE

7.7%

DEALER'S AUTHORIZED SIGNATURE

D. Wayne Johnson☐ 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)

Charlie McCrea

COUNTY OFFICE/VEHICLE OPERATOR NUMBER

2401-21

SIGNATURE

Charlie McCrea

DATE

11/8/04**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  
If you need special accommodations

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