

RETURN ADDRESS

Washington Federal Savings

PO Box 527

Burlington, WA 98233



200412010093

Skagit County Auditor

12/1/2004 Page

1 of

2 1:58PM

**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<br><b>+325081</b> | YEAR<br><b>05</b> | MAKE<br><b>SKY</b> | LENGTH/WIDTH(FEET)<br><b>60 X 28</b> | VEHICLE IDENTIFICATION NUMBER (VIN)<br><b>B8910151T</b> |
|--------------------------------------|-------------------|--------------------|--------------------------------------|---|

**2 LAND** LEGAL DESCRIPTION ON PAGE \_\_\_\_\_

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER **360407-4-013-0800**

|                   |       |  |                        |
|-------------------|-------|--|------------------------|
| LOT<br><b>A-2</b> | BLOCK | PLAT NAME<br><b>Short Plat PL01-0597</b> | SECTION/TOWNSHIP/RANGE |
|-------------------|-------|--|------------------------|

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** ADDITIONAL NAMES ON PAGE \_\_\_\_\_

|               |   |                                    |
|---------------|---|------------------------------------|
| COUNTY NUMBER | NUMBER OF REGISTERED OWNERS<br><b>2</b> | NUMBER OF LEGAL OWNERS<br><b>1</b> |
|---------------|---|------------------------------------|

NAME OF REGISTERED OWNER  
**Lanny Routon**

NAME OF ADDITIONAL REGISTERED OWNER  
**Elaine Routon**

|                                   |                           |                    |                          |
|-----------------------------------|---------------------------|--------------------|--------------------------|
| ADDRESS<br><b>18845 Routon Ln</b> | CITY<br><b>Burlington</b> | STATE<br><b>WA</b> | ZIP CODE<br><b>98233</b> |
|-----------------------------------|---------------------------|--------------------|--------------------------|

NAME OF LEGAL OWNER  
**Washington Federal Savings**

NAME OF ADDITIONAL LEGAL OWNER

|                                   |                        |                    |                          |
|-----------------------------------|------------------------|--------------------|--------------------------|
| ADDRESS<br><b>425 Pike Street</b> | CITY<br><b>Seattle</b> | STATE<br><b>WA</b> | ZIP CODE<br><b>98101</b> |
|-----------------------------------|------------------------|--------------------|--------------------------|

**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 *(X) Lanny H. Routon*

Signature of Additional Registered Owner and Title, IF APPLICABLE *(X) Elaine J. Routon*

NOTARY SEAL OR STAMP NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of **Skagit** Signed or attested before me on **8/31/04**

by **Lanny Routon** Signature *Doreen K Nystrom*  
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by **Elaine Routon** **Doreen K Nystrom**  
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title \_\_\_\_\_ AND: County/Office No. OR Dealer No. OR **3/10/06**  
DEALERSHIP POSITION/AGENT/NOTARY 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.

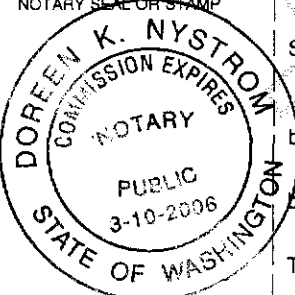
NAME (TYPED OR PRINTED) BLDG PERMIT OFFICE/PHONE # **336-9410** BLDG PERMIT # **BP04-0534**  
**Elaine Pitman** **SKAGIT COUNTY PERMIT CENTER**

SIGNATURE / POSITION DATE  
*Elaine Pitman Permit Technician* **12-1-04**

**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<br>County of <u>Skagit</u>   | Signed or attested<br>before me on <u>11/10/04</u>    |
|  | by <u>Washington Federal Savings</u><br>PRINT NAME OF LEGAL OWNER  | Signature <u>Doreen K. Nystrom</u><br>NOTARY OR AGENT |
|  | by <u>Greg Peck - Vice-President</u><br>PRINT NAME OF LEGAL OWNER and Br Mgr                             | <u>Doreen K Nystrom</u><br>PRINTED NAME OF NOTARY     |
| Title _____<br>DEALERSHIP POSITION/AGENT/NOTARY                                    | <b>AND:</b> County/Office No. <u>OR</u><br>Dealer No. <u>OR</u> <u>3/10/06</u><br>Notary Expiration Date |   |

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

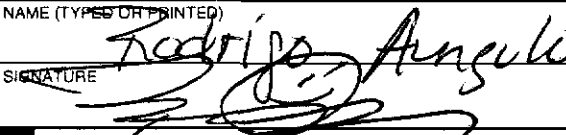
Lot A-2 of Short Plat No. PL-01-0597, recorded January 4, 2002, under Auditor's File No. 200201040081, records of Skagit County, Washington, and being a portion of the SE 1/4 of the SE 1/4 of Section 7, Township 36 North, Range 4 East, W.M.  
 Together with a non-exclusive easement for ingress, egress and utilities, over and across Routon Lane, as shown on said Short Plat.  
 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)  | WA DEALER NUMBER          | DATE OF SALE                  |
| PURCHASE PRICE  | TAX JURISDICTION/TAX RATE | DEALER'S AUTHORIZED SIGNATURE |
| <input type="checkbox"/> <b>USE TAX EXEMPT</b> 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)<br><u>Rodrigo Angulo</u>   | COUNTY OFFICE/VES. OPERATOR NUMBER<br><u>2901-07</u> |
| SIGNATURE<br> | DATE<br><u>12/01/04</u>                              |

|                      |            |             |                 |                 |         |                  |
|----------------------|------------|-------------|-----------------|-----------------|---------|------------------|
| <b>10 TITLE FEES</b> | 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 p  
 If you need special accommodation,



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