

RETURN ADDRESS



200501180147
Skagit County Auditor

1/18/2005 Page 1 of 2 2:10PM

		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE <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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
215901	2002	SKYLING	X	9U910188P	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER 4076-003-002-0003		
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
LOT 182	32 N 1/2	Vac Magnolia	Vol 3 of Plats pg. 17		Skagit / BURLINGTON
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
29	Two One		Two One		
NAME OF REGISTERED OWNER					
Thomas CROWTHER					
NAME OF ADDITIONAL REGISTERED OWNER					
None					
ADDRESS		CITY	STATE	ZIP CODE	
1107 RUCKER AVENUE		Everett	WA	98201	
NAME OF LEGAL OWNER					
Same					
NAME OF ADDITIONAL LEGAL OWNER					
Same as above					
ADDRESS		CITY	STATE	ZIP CODE	
GRANTEE					
NAME					
Susan CROWTHER					
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: Thomas Crowther					
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 Skagit Signed or attested before me on 1/18/05 by THOMAS CROWTHER PRINT NAME OF REGISTERED OWNER by PRINT NAME OF REGISTERED OWNER Title DEALERSHIP POSITION/AGENT/NOTARY			
		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 2/2/05			
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: <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)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
James Crowther		360-755-0077		98769	
SIGNATURE / POSITION				DATE	
James Crowther				1-18-05	

JAMES SHERWOOD

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) SIGNATUREState of Washington
County of _____Signed or attested
before me on _____by
PRINT NAME OF LEGAL OWNER _____Signature _____
NOTARY OR AGENTby
PRINT NAME OF LEGAL OWNER _____PRINTED NAME OF NOTARY,
County/Office No. OR
Dealer No. OR
Notary Expiration DateTitle
DEALERSHIP POSITION/AGENT/NOTARY

AND:

7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)LOTS 1 8 2 BLK 3 AMENDED PLAT BURLINGTON
SKAGIT COUNTY WA. AS PER PLAT RECORDED
VOL 3 OF PLATS, PG 17**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)

COUNTY OFFICE/VES OPERATOR NUMBER

SIGNATURE

DATE

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 accom.

200501180147

Skagit County Auditor