

RETURN ADDRESS

Chicago Title Company

P. O. Box 670

Burlington, WA 98233



200502170143

Skagit County Auditor

2/17/2005 Page 1 of 2 3:35PM

CHICAGO TITLE CO.

1C32839V



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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
Z097968	1994	LEXIN	48 X 28	2T911189GAB

2 LAND

LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVEDREAL PROPERTY TAX PARCEL NUMBER
4623-000-005-0004-1105663

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
Lot 5		Garden Terrace	

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	2	1

NAME OF REGISTERED OWNER

REGNIER, JAMES H.

NAME OF ADDITIONAL REGISTERED OWNER

REGNIER, S. DARLYNE

ADDRESS	CITY	STATE	ZIP CODE
8947 Garden Terrace	Sedro Woolley	WA	98284

NAME OF LEGAL OWNER

WELLS FARGO BANK, N.A.

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS	CITY	STATE	ZIP CODE
3601 Minnesota Drive	Bloomington	MN	55435

GRANTEE

NAME

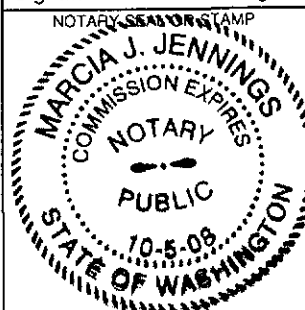
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:

Signature of Registered Owner and Title, IF APPLICABLE

James H. Regnier

Signature of Additional Registered Owner and Title, IF APPLICABLE

S. Darlyne Regnier



NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of SkagitSigned or attested
before me on Nov. 3, 2004by James H. Regnier
PRINT NAME OF REGISTERED OWNERSignature Marcia J. Jennings
NOTARY OR AGENTby S. Darlyne Regnier
PRINT NAME OF REGISTERED OWNERMarcia J. Jennings
PRINTED NAME OF NOTARYTitle Notary Public
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR 0/5/2008
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 #	BLDG PERMIT #
TISH CAMPBELL - SKAGIT COUNTY PLANNING	360/336-9410	94-0148/28070

SIGNATURE / POSITION	DATE
Tish Campbell Permit Technician	02/15/05

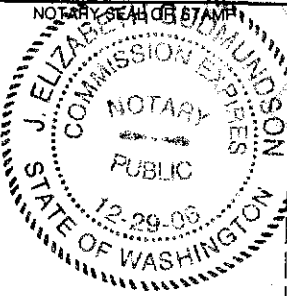
6 SIGNATURE OF LEGAL OWNER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Diane B. Healer

Signature of Additional Legal Owner and Title, IF APPLICABLE

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>King</u>	Signed or attested before me on <u>11/10/04</u>
	by <u>Wells Fargo Bank, N.A.</u> <u>Diane B. Healer</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>J. Elizabeth Cadmardon</u>
Title _____		AND: County/Office No. OR _____ Dealer No. OR <u>12/29/06</u> Notary Expiration Date
DEALERSHIP POSITION/AGENT/NOTARY _____		

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

Lot 5, PLAT OF GARDEN TERRACE, according to the plat thereof, recorded in Volume 15 of Plats, pages 153 and 154, records of Skagit County, Washington.

Situated in Skagit County, 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) <u>1</u>		WA DEALER NUMBER	DATE OF SALE
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE	
<input type="checkbox"/> 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>Rodriguez Angulo</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>2901-02</u>
SIGNATURE <u>[Signature]</u>	DATE <u>02-17-2005</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 has a policy of providing equal access to its services.
If you need special accommodation.



200502170143
Skagit County Auditor