



200502180063

Skagit County Auditor

2/18/2005 Page 1 of 2 11:35AM

RETURN ADDRESS

CHICAGO TITLE IC30068

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 %099693	YEAR 1994	MAKE Skyline	LENGTH/WIDTH (FEET) 48 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 2T91011# 2T910113H
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
4623-000-002-0001

LOT Lot 2	BLOCK	PLAT NAME Plat of Garden Terrace	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER Skagit	NUMBER OF REGISTERED OWNERS 1	NUMBER OF LEGAL OWNERS 1
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NAME OF REGISTERED OWNER
PATTERSON, DENNIS J.

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS 8969 GARDEN TERRACE LANE	CITY SEDRO WOOLLEY	STATE WA	ZIP CODE 98284
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NAME OF LEGAL OWNER
WASHINGTON MUTUAL BANK

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS 3060 139TH AVE. S.E., STE 200 / 986LCWA	CITY BELLEVUE	STATE WA	ZIP CODE 98005
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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 *Dennis J. Patterson*

Signature of Additional Registered Owner and Title, IF APPLICABLE

	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>Feb.</u> , 2004
	by <u>Dennis J. Patterson</u> PRINT NAME OF REGISTERED OWNER	Signature <i>Marcia J. Jennings</i> NOTARY OR AGENT
	by _____ PRINT NAME OF REGISTERED OWNER	<u>Marcia J. Jennings</u> PRINTED NAME OF NOTARY
Title <u>Notary Public</u> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. <u>OR</u> Dealer No. <u>OR 10/5/2004</u> 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) <i>Tisha Campbell - Skagit County Planning</i>	BLDG PERMIT OFFICE/PHONE # <i>360/536-4410</i>	BLDG PERMIT # 28067
SIGNATURE / POSITION <i>Tisha Campbell, Permit Technician</i>	DATE <i>02/14/05</i>	

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 Michael Robbins

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>2/26/04</u>
	by <u>Michael Robbins</u> PRINT NAME OF LEGAL OWNER	Signature <u>[Signature]</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>Stacey Rae Rohlfes</u>
Title _____ DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>11/19/05</u>	

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

Lot 2, PLAT OF GARDEN TERRACE, according to the plat thereof, recorded in Volume 15 of Plats, pages 153 and 154, records of Skagit County, Washington.

Situate 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)	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>Rusty Lowery</u>	COUNTY OFFICE/VEHICLE OPERATOR NUMBER <u>290108</u>
SIGNATURE <u>Rusty Lowery</u>	DATE <u>2/18/05</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, please

