

RETURN ADDRESS

Thomas W. Bass
 Robin K. Bass
 Po Box 903
 Burlington WA 98233



200503230044
 Skagit County Auditor

3/23/2005 Page 1 of 2 10:21AM

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

TPD / PLATE NUMBER 1282529	YEAR 2003	MAKE Fleet	LENGTH/WIDTH(FEET) 40X27	VEHICLE IDENTIFICATION NUMBER (VIN) ORFL248A290116X13
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER 4747-000-065-0000

LOT 5	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE Plat of Willard estates	QUARTER/QUARTER SECTION
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER Thomas W. Bass DOL CUSTOMER ACCOUNT NUMBER _____
 NAME OF ADDITIONAL REGISTERED OWNER Robin K. Bass DOL CUSTOMER ACCOUNT NUMBER _____

ADDRESS 39823 Willard Lane Concrete CITY Concrete STATE WA ZIP CODE 98237
 NAME OF LEGAL OWNER Same As Registered DOL CUSTOMER ACCOUNT NUMBER _____
 NAME OF ADDITIONAL LEGAL OWNER _____ DOL CUSTOMER ACCOUNT NUMBER _____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

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 *Thomas W. Bass*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Robin K. Bass*

	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington County of Skagit	Signed or attested before me on 3-14-05
	by Thomas W. Bass PRINT NAME OF REGISTERED OWNER	Signature <i>Kathie Hickok</i> NOTARY OR AGENT
	by Robin K. Bass PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY Kathie Hickok
Title Notary	AND: County/Office No. OR 1707 Dealer No. OR 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) TISH CAMPBELL	BLDG PERMIT OFFICE PHONE # 360/336 4410	BLDG PERMIT # BPO4-1612
SIGNATURE / POSITION <i>Tish Campbell</i> Permit Technician		DATE 03/21/05

Skagit County Auditor
200503230044



The Department of Licensing has
if you need special accommodation

8 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

7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's
Lot 5, 1/4 Part of Willard Estates, according to the Plat thereof recorded December 23, 1999, under Auditor's File No. 1999

6 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.

5 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.

4 CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

3 DEALER'S REPORT OF SALE

DEALER NAME (TYPED OR PRINTED)
WA DEALER NUMBER
DATE OF SALE

PURCHASE PRICE
TAX JURISDICTION/TAX RATE
DEALER'S AUTHORIZED SIGNATURE

2 USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).

1 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)

10 TITLE FEES

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES	TOTAL FEES & TAX
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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.

NAME (TYPED OR PRINTED)
SIGNATURE
DATE
COUNTY OFFICER'S OPERATOR NUMBER

3/23/05
39-01-17
REGINA A. FRIEDL-GRAHAM
Katie E. Jones

