



200504140079

Skagit County Auditor

4/14/2005 Page 1 of 2 12:43PM

RETURN ADDRESS

Daniel Lambertson  
Theresa Lambertson  
1036 Lake Samish Rd.  
Bellingham WA 98229

STATE OF WASHINGTON Department of LICENSING MANUFACTURED HOME APPLICATION PLEASE CHECK ONE

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)

2 LAND LEGAL DESCRIPTION ON PAGE MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER

LOT BLOCK PLAT NAME SECTION/TOWNSHIP/RANGE

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS

NAME OF REGISTERED OWNER Daniel D. Lambertson

NAME OF ADDITIONAL REGISTERED OWNER Theresa M. Lambertson

ADDRESS CITY STATE ZIP CODE SAME as Above

NAME OF LEGAL OWNER Same as above

NAME OF ADDITIONAL LEGAL OWNER N/A

ADDRESS CITY STATE ZIP CODE 1036 Lake Samish Rd. Bellingham WA 98229

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

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE State of Washington County of Skagit Signed or attested before me on 4-14-05

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 Kim Keeper 1st American Title 360-424-0111

SIGNATURE / POSITION DATE K Keeper, LPD 4-14-05

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 # BPO4-0532

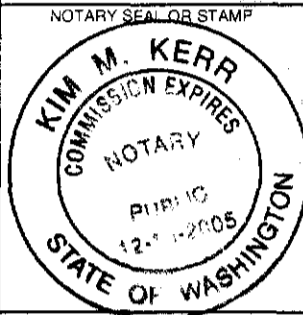
SIGNATURE / POSITION DATE

**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 Dave Lambert

Signature of Additional Legal Owner and Title, IF APPLICABLE Shirley Lambert



**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**

State of Washington  
County of Skagit

Signed or attested  
before me on 4-14-05

by Daniel S Lambertson  
PRINT NAME OF LEGAL OWNER

Signature K Kerr  
NOTARY OR AGENT

by Theresa M Lambertson  
PRINT NAME OF LEGAL OWNER

Signature Kim Kerr  
PRINTED NAME OF NOTARY

Title NOTARY  
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR  
Dealer No. OR 1211565  
Notary Expiration Date

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

TRACT 4 OF SKAGIT COUNTY SHORT PLAT 33-84, APPROVED NOVEMBER 14, 1984, AND RECORDED NOVEMBER 19, 1984, UNDER AUDITOR'S FILE NO. 8411190033, IN VOLUME 6 OF SHORT PLATS, PAGE 191, RECORDS OF SKAGIT COUNTY, WASHINGTON, BEING A PORTION OF THE NORTH 1/2 OF SECTION 12, TOWNSHIP 36 NORTH, RANGE 3 EAST, W.M.

**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>Husty Lowery</u>	COUNTY OFFICE/FS OPERATOR NUMBER <u>290108</u>
SIGNATURE <u>Husty Lowery</u>	DATE <u>4/14/05</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 accommodations...



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