

RETURN ADDRESS



200505120061
Skagit County Auditor

5/12/2005 Page 1 of 2 11:29AM

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 New	YEAR 05	MAKE SKY	LENGTH (FEET) 66/28	VEHICLE IDENTIFICATION NUMBER (VIN) B8910386T
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2 LAND LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER
360419-0-005-0107, P49451

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
David P. Garcia

NAME OF ADDITIONAL REGISTERED OWNER
Debra J. Garcia

ADDRESS 18120 SE 18878 Colony Road	CITY Bow	STATE WA	ZIP CODE 98232
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NAME OF LEGAL OWNER
Horizon Bank

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS 1500 Cornwall	CITY Bellingham	STATE WA	ZIP CODE 98225
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GRANTEE

NAME
Same as Registered Owner

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 *David P. Garcia*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Debra J. Garcia 2-17-05*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION

State of Washington Signed or attested
County of Skagit before me on 2-17-05

by David P. Garcia Signature *K. Franey*
Printed Name of Registered Owner NOTARY OR AGENT

by Debra J. Garcia Kaydeen Franey
Printed Name of Registered Owner PRINTED NAME OF NOTARY

County/Office No. **OR**
AND: Dealer No. **OR**
Notary Expiration Date 11-02-06

Title _____ Notary _____
DEALERSHIP POSITION/AGENT/NOTARY

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) TISH CAMPBELL - SKAGIT CO. PLUMB & DEV. SERV.	TITLE COMPANY/PHONE NUMBER 560/536-4410	PERMIT # B104-1624
SIGNATURE/POSITION <i>Tish Campbell, Permit Tech.</i>	DATE 05/06/05	

Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.

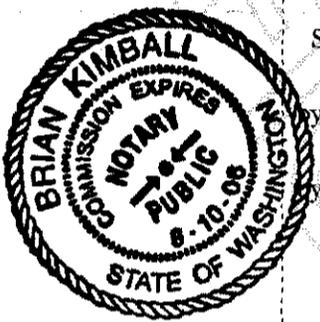
5 BUILDING PERMIT OFFICE CERTIFICATION

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) FISH CAMPBELL-SKAGIT CO. PLNG. DEV. SERV. 9410 BLDG PERMIT OFFICE/PHONE # 360/336 BLDG PERMIT # BPOA-1424
 SIGNATURE/POSITION [Signature] DATE 05/10/05

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 Reah M Dowell / Horizon Bank
 Signature of Additional Legal Owner and Title, IF APPLICABLE _____
 NOTARY SEAL OR STAMP



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE
 State of Washington Signed or attested before me on 4/21/05
 County of Skagit Whatcom
Reah M Dowell Co Signature [Signature]
 Printed Name of Legal Owner NOTARY OR AGENT
Horizon Bank Brian Kimball
 Printed Name of Legal Owner PRINTED NAME OF NOTARY
 County/Office No. OR
 AND: Dealer No. OR
 Notary Expiration Date 8/10/06
 Title _____
 DEALERSHIP POSITION/AGENT/NOTARY

7 LAND DESCRIPTION

Lot 2 of Short Plat #PL04-0519, recorded 11/23/04, Aud File #200411230133, records of Skagit Co., Wa and being a ptn of Gov. Lot 3, Section 19, Township 36 North, Range 4 East, W.M.

8 DEALER'S REPORT OF SALE

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

DEALER NAME (TYPED OR PRINTED) <u>COACH CORRAL INC</u>	WA DEALER NUMBER <u>4278</u>	DATE OF SALE <u>4-27-05</u>
PURCHASE PRICE <u>\$ 93595-</u>	TAX JURISDICTION/TAX RATE <u>7.9</u>	DEALER'S AUTHORIZED SIGNATURE <u>Linda Milbourn</u>
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) Rodrigo Angulo COUNTY OFFICE/VES OPERATOR NUMBER 2901-02
 SIGNATURE [Signature] DATE 5/12/05

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.

