; BETURN ADDRESS Chicago Title					200505120110 Skagit County Auditor				
P.O. Box 63					5/12/200	•	inty Audito 1 of	or 2 3:23PN	
Mount Verno		98273			5/12/200	,, raye			
				CHI	ICAGO TI	TLE COMP	ANY IC345	571	
STATE OF WASHIN	ICTON	MANUFA	CTUR	-			CHECK O		
	ING	AP	PLICAT	TION act is guilty	⊠TITL □TRAI □REM			OPERTY	
1 MANUFACTUR			,						
TPO / PLATE NUMBER	YEAR 1984	MAKE CHAMP	LENGTH/WIDT	00 100	LE IDENTIFICATI	ION NUMBER (VII	۷)	1.77 %	
2 LAND	1904	CHAMP	52 X	LEGAL DES					
MANUFACTURED	HOME WILL BI	XX AFFIXED	☐ REMO\			AX PARCEL NUM	945		
LOT	вьоск	PLAT NAME			<u> </u>	SECTION/TOW			
2	EOIGTEDES"	SKAGIT		No. PLO	L NAMES O	٠,٠			
GRANTOR(S) R COUNTY NUMBER	EGISTERED/L		of REGISTERED			ER OF LEGAL O	VNERS PIETAR	1636014	
	29	2				1			
EDWIN N.			1						
NAME OF ADDITIONAL RI	EGISTERED OWNE	R	A CONTRACTOR OF THE PARTY OF TH						
CARYN L.	NORTON		CITY	,		STATE	ZIP CODE		
4580 Bla	nk Road		Sedro	Woolley	y		8284		
NAME OF LEGAL OWNER				and the second		,			
Peoples NAME OF ADDITIONAL LE									
ADDRESS 1801 Riv	erside I	rive	Mount	Vernon	age of the state o	WA 98	ZIP CODE 3273		
GRANTEE					Same Self				
NAME									
I DO SOLEMNLY A' VEHICLE AND THIS	TTEST UNDER	PENALTY OF P	ERJURY TH	AT I / WE AM/	ARE THE RE	GISTERED	WNER(S) OF	THIS	
					72				
		Owner and Title, II		a man	77		<i>6</i>		
Signature of Addition	nal Registered (Owner and Title, If	F APPLICABI	FICATION FO	DESCIPTED	ED OWNER	S) SIGNATUE	<u> </u>	
Signature of Addition	ÀLEC SI				750000000000000000000000000000000000000				
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	"MES	County o	Skagi	t		efore me on _	05/09/0 · Λ	3	
AND HOTE	ARY D	Edwin N.			_ Signature	Mari	eel Tale	eh	
	3LIC by	PRINT NAME OF RECEIVED				NOTARLY OR AGE ie~K.~P	J. 4		
10.1	J. J. S. Py	PRINT NAME OF RE				ME OF NOTARY	F June		
STATE OF	WASK	le Notary			AND	i Dean	e No. OR 10/	15/08	
4 TITLECOMPAN	LIV CERTIFICA	DEALERSHIP POSI	TION/AGENT/NO	TARY		Notary Expire	Kion Date	<u> </u>	
I certify that the lega	I description of f	he land and own	ership is true :						
NAME (TYPED OR PRINT	ED)			TITLE COMP	PANY / PHONE N	UMBER			
SIGNATURE / POSITION							DATE		
Finalize this applic	ation with a Lic	ensing Agent w	ithin 10 cale	ndar days of th	ne date Title	Company Re	oresentative s	signs.	
5 BUILDING PER	MIT OFFICE CE	RTIFICATION							
I certify that:	□ a building p	ctured home has ermit has been is	sued for this p	ourpose and the	erty as descri e attachment	bed. will be inspect BLDG PE	ed upon comp	letion."	
NAME (TYPED OR PRINT	sauth	ier	1LDG PERMIT OF 360	-336-	9410		5/25		
SIGNATURE / POSITION	M -	111	Dla	i an I) S	as Duran	5 -/	1-15	

		asemon''	41-Marine	
6 SIGNATURE OF LEGAL O	WNER			
SIGNATURE OF LEGAL OWN		SENT FOR FLIMINATIO	ON OF TITLE / REMOVAL	FROM REAL PROPERTY
			0.//	
Signature of Legal O	wner and Title, IF APP	LICABLE	March 122	2 V. fr
Signature of Additional Legal O	inocond Title IE ADD	LICABLE		•
Signature of Additional Legal O			211502150410111150/0	N OLONIATURE
WILL WAS BUILD	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ON FOR LEGAL OWNER(S	•
Sam Sales	State of Washington County of		Signed or attested before me or	
WOTARY ST		3	1/.1/	6000
	by Lennis	boe	Signature	
NOTARY	PRINT NAME OF LEG	GAL OWNER	NOTARY OF A	AGENT
	by PRINT NAME OF LEG	GAL OWNER	PRINTED NAME OF NOTA	RY
The state of the s	Title V.P.		County/O	ffice No. OR 10-1-2007
The Manual Control of the Control of	DEALERSHIP POSIT	ION/AGENT/NOTARY		paler No. OR 10-1 2001 piration Date
LAND DESCRIPTION (A I	gal description of th	e land can be obtained	from the local County Ass	sessor's Office
Lot 2 of SKAGIT	Tarret.	N. A. A.		
September 3, 20	004. and red	orded Septem	nber 7, 2004.	under
Auditor's File	No. 2004090	70120, reco	rds of Skagit	County,
Washington; bei	ng a portic	on of the Noi	rthwest Quarte	r of the
Southeast Quart				
Quarter of Sect		vnship 36 No	rth, Range 4 E	ast of the
Williamette Mer		Woohington		
Situated in Ska	git County,	wasnington.	• 1	
DEALER'S REPORT OF S			- } 	-
CERTIFY THAT THIS INFO		CT. THE VEHICLE IS CL	EAR OF ENCUMBRANCE	S EXCEPT AS SHOWN.
ANY REQUIRED SALES TA				
DÉALER NAME (TYPED OR PRINTED)			WA DEALER NUMBER	DATE OF SALE
PURCHASE PRICE TAX	JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIG	NATURE	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	DEFECTION OF THE CONTRACT OF T		
USE TAX EXEMPT S	ale to a Certified Tribal	member on the reservati	on (attach notarized stateme	ent of delivery).
COUNTY AUDITOR/AGEN			4 27 2 4	
certify that the above application	appears to have been c	completed correctly, and ti	ne applicant has sufficient do	cumentation to proceed with
he recording of this form.				<u>Name in the second of the sec</u>
AME (TYPED OR PRINTED)	10000		COUNTY OFFICE/VES OPERAT	OR NUMBER
SIGNATURE	<u> </u>	J-C/		DATE
Lustin	1 x TIII	_ [5/12/16
O TITLE FEES		7		Jacob Contraction
FILING FEE APPLICATION	ON MOBILE HO	ME FEE ELIMINATION	FEE USE TAX	SUBAGENT FEES
	-		· V	TOTAL FEES & TAX
				Commence of the second
			ne County Aud itor / Veh the County Recording	
			Recording Office retains	
your	original application	form, obtain a certifie	d copy of the recorded	form.
APPLICANTS	Once recorded	you must return to a	Vehicle Licensing office	to file the
AFF LICANTS	· ·		ing all required fees. Ve	
		ents charge a service		
	a an assentation (I.)	form for Title Fillerie	ation Description 5	
			ation, Removal from Re ed Home Application Ins	

The Department of Licensing '-If you need special accomm

