## RETURN ADDRESS

First American	Title C	ompany _	
3202 Commercia	l Avenue		
		<del></del>	<del></del>
Anacortes, WA	98221		

200505230131 Skagit County Auditor

5/23/2005 Page 1 of 211:32AM

MANUFACTURED HOME APPLICATION 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)  MANUFACTUREDHOME TO JATE RUMBER   YEAR   MAKE   LENGTHWIDTH/FEET   VEHICLE OPENT FICATION NUMBER (VIN)    MANUFACTUREDHOME TO JATE RUMBER   YEAR   MAKE   LENGTHWIDTH/FEET   VEHICLE OPENT FICATION NUMBER (VIN)    MANUFACTUREDHOME   YEAR   SEQUENT   SECTION/TOWNSH PRIAMES    JACK   PART NAME   SECTION/TOWN   PRIAMES    JACK   PART NAME   PART NAME	A84371 A	it America	~					
POPIETIZE NUMBER   VAR   1981   Sequa   CON 24   241881S093	STATE OF WASHIN Department of ICENS Anyone who knowin	SING	MANUFA AP	PLICATION f a material fact is gu	illty	TITLE ELIMI TRANSFER REMOVAL F	NATION IN LOCATION ROM REAL F	·
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LEGAL DESCRIPTION ON PAGE  MANUFACTURED HOME WILL BE AFFIXED REMOVED  ADDITIONAL NAMES ON PAGE  NUMBER OF REGISTERED COWNERS  CATALES D. SCHUCK  ANDRESS  23526 57th Ave. SE  Woodinville  WA 98072  WANDE OF REGISTERED COWNER  Charles D. Schuck  ANDRESS  CTY  STATE ZIP CODE  WA 98072  WAS 98072  ANDRESS  AFFIXED REMOVED  AFFIXED REMOVED  CHARLES ON SCHUCK  WOOD AND ARREST CONNERS  CHARLES ON SCHUCK  ADDRESS  CITY  STATE ZIP CODE  WA 98072  GRANTEE  HOWE  FILE OF A VE. SE  Wood Inville  WA 98072  GRANTEE  WAS 98072  GRANTEE  FILE OF A VE. SE  WOOD AND ARREST CONNERS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Additional Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Title, IF APPLICABLE  ANDRESS  SIgnature of Registered Owner and Titl	TPO / PLATE NUMBER	YEAR	MAKE		VEHICLE IDEN	ITIFICATION NUMBE	A (VIN)	17.
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## ANNIFACTURED HOME WILL BE STAFFIXED   REMOVED   3226_003_039_0004/P45874      OT   PLAT NAME   SECTION/TOWNSHIPPANAGE   SECTION/TOWNSHIPPANAGE	2 LAND			LEGA		<del></del>		<u></u>
3 GRANTOR(S) REGISTERED/LEGAL LOWNER(S)  OLDNYTYMINDER  NUMBER OF REGISTERED OWNERS  NUMBER OF REGISTERED OWNERS  Charles D. Schuck  NUMBER OF REGISTERED OWNERS  Charles D. Schuck  ADDRESS  23526 57th Ave. SE  Woodinville  WA 98072  WAME OF AGDITIONAL LEGAL OWNER  Charles D. Schuck  NUMBER OF REGISTERED OWNERS  Gayla R. Schuck  MADDRESS  CITY  STATE  ZP CODE  WA 98072  MANE OF AGDITIONAL LEGAL OWNER  Charles D. Schuck  NUMBER OF REGISTERED OWNERS  Charles D. Schuck  MADDRESS  CITY  STATE  ZP CODE  WA 98072  GRANTEE  NAME  Eric: William Gilbertson  IDO SOLEMNLYATTEST UNDER PENALTY OF PERJURY THAT I/WE AMMARE THE REGISTERED OWNER(S) OF THIS  VEHICLE AND THIS INFORMATION IS ACCURATE:  Signature of Additional Registered Owner and Title, IF APPLICABLE  WAS SIGNATURE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WAS SIGNATURE  NOTARY STATE  BY ACT OF PERSON ONER  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WAS SIGNATURE  NOTARY STATE  Signature of Registered Owner and Title, IF APPLICABLE  WAS SIGNATURE  NOTARY STATE  NOTARY STATE  NOTARY STATE  DEALERSHIP POSITIONAGEN TROTARY  AND:  DEALERSHIP POSITIONAGEN TROTARY  AND:  DEALERSHIP POSITIONAGEN TROTARY  AND:  DEALERSHIP POSITIONAGEN TROTARY  THE NOTARY OF PERSON OF REGISTERED OWNER(S) SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WAS SIGNATURE  NOTARY STATE	MANUFACTURED H	OME WILL BE	AFFIXED	REMOVED				
GRANTOR(S) REGISTERED/LEGAL OWNER(S)  OUNTY WAMBER OF LEGAL OWNERS  Charles D. Schuck  ADDRESS  2 3526 57th Ave. SE  Woodinville  WA 98072  WAME OF REGISTERED OWNER  Gayla R. Schuck  ADDRESS  23526 57th Ave. SE  Woodinville  WA 98072  WAME OF ADDITIONAL LEGAL OWNER  Gayla R. Schuck  CITY  STATE ZIP CODE  WA 98072  WAME OF ADDITIONAL LEGAL OWNER  Gayla R. Schuck  CITY  STATE ZIP CODE  WA 98072  GRANTEE  FIG. William Gilbertson  IDO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/WE AMMARE THE REGISTERED OWNER(S) OF THIS  VEHICLE AND THIS INFORMATION IS ACCURATE:  Signature of Registered Owner and Title, IF APPLICABLE  WOODING STATE STATE  Signature of Registered Owner and Title, IF APPLICABLE  WOODING STATE  SIgnature of Registered Owner and Title, IF APPLICABLE  WOODING STATE  SIGNATURE  NOTARY SKIMPS STAP  OF WASHINGTON  OF WASHINGTON  TITLE COMPANY / PHONE RUMBER  FIRST AME OF REGISTERED OWNER  FIRST MANE OF REGISTERED OWNER  THE NOTARY OF AGENT  NOTARY OF AGENT  THE COMPANY / PHONE RUMBER  FIRST AMERICAN TITLE COMPANY / PHONE RUMBER  FIN		1.	No. 10 10 10 10 10 10 10 10 10 10 10 10 10			SECTION	/TOWNSHIP/RANGE	
NUMBER OF REGISTERED OWNERS  Charles D. Schuck  NAME OF ADDRESS  Gayla R. Schuck  ADDRESS  SCHUCK  NAME OF ADDRIVAL REGISTERED OWNER  Gayla R. Schuck  NAME OF ADDRIVAL REGISTERED OWNER  Gayla R. Schuck  NAME OF ADDRIVAL REGISTERED OWNER  Gayla R. Schuck  NAME OF ADDRIVAL LEGAL OWNER  Gayla R. Schuck  NAME OF ADDRIVAL LEGAL OWNER  Gayla R. Schuck  NAME OF ADDRIVAL LEGAL OWNER  Gayla R. Schuck  NOTARY  STATE ZIP CODE  WA 98072  STATE ZIP CODE  WA 98072  GRANTEE  WOOD INVITION OF THIS INFORMATION IS ACCURATE:  Signature of Registered Owner and Title, IF APPLICABLE  NOTARY SEMBORY  SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY SEMBORY  NOTARY SEMBORY  NOTARY  OF WASHINGTON OF AGENT  THE NOTARY  OF WASHINGTON OF REGISTERED OWNER  Signature OF REGISTERED OWNER  NOTARY SEMBORY  OF WASHINGTON OF REGISTERED OWNER  Signature OF REGISTERED OWNER  THE NOTARY OF REGISTERED OWNER  PRINT NAME OF REGISTERED OWNER  THE NOTARY OF REGISTERED OWNER  SIGNATURE OF PRINTED OF REGISTERED OWNER  SIGNATURE OF REGISTERED OWNER  THE COMPANY I PHONE NUMBER  VICLE OWNER/OF PRINT OF REGISTERED OWNER  SIGNATURE OF PRINTED OF REGISTERED OWNER  SIGNATURE OF REGISTERED OWNER  SIGNATURE OF REGISTERED OWNER  THE COMPANY I PHONE NUMBER  VICLE OWNER/OF REGISTERED OWNER  SIGNATURE OF REGISTERED OWNER  SIGNATURE O						MEC ON DAGE		
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Charles D. Schuck  Charles D. Schuck  Charles D. Schuck  Coty State 2/P code  23526 57th Ave. SE Woodinville WA 98072  Charles D. Schuck  Coty State 2/P code  State Of Registered Cover and Title, IF APPLICABLE  County of Stagit  County of Skagit  County of Skagit  Signature of Additional Registered Cover and Title, IF APPLICABLE  NOTANY Shifting State  NOTANY Shifting State  County of Skagit	COON! Y NUMBER		NOMBERO					
Charles D. Schuck  Gayla R. Schuck  ADDRESS  23526 57th Ave. SE Woodinville WA 98072  MANDE OF LEAR A LOWER  Charles D. Schuck  ADDRESS  CITY  STATE ZIP CODE  WA 98072  MANDE OF LEAR A LOWER  Charles D. Schuck  ADDRESS  23526 57th Ave. SE Woodinville WA 98072  GAYLA R. Schuck  ADDRESS  23526 57th Ave. SE Woodinville WA 98072  GRANTEE  Bric: William Gilbertson  IDO 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 Additional Registered Owner and Title, IF APPLICABLE  MOTARY Signature of Additional Registered Owner and Title, IF APPLICABLE  MOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOODING SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIGNATURE  Signature of Additional Registered Owner and Title Owner and Title Owner and Title Company 3601-293-5623  THILE COMPANY PHONE NUMBER  WAS AND:  DEALERSHEP POSITIONAGENT/NOTARY  NOTARY SIGNATURE  WOTARY SIGNATURE  THE COMPANY PHONE NUMBER  WAS ASSOCIATED SIGNATURE  SIGNATURE POSITION SIGNATURE  WAS ASSOCIATED SIGNATURE  SIGNATURE POSITION SIGNATURE  THE COMPANY PHONE NUMBER  SIGNATURE POSITION SIGNATURE  THE COMPANY PHONE NUMBER  SIGNATURE POSITION SIGNATURE  THE COMPANY PHONE NUMBER  SIGNATURE POSITION SIGNATURE  SIGNATURE POSITION SIGNATURE  SIGNATURE  SIGNATURE POSITION SIGNATURE  SIGNATURE POSITION SIGNATURE	NAME OF REGISTERED C	WNER	Lagrandia A	<del>- 1                                     </del>		<u> </u>		
ADDRESS  23526 57th Ave. SE  Woodinville  WA  98072  WAME OF LEGAL OWNER  Gayla R. Schuck  NAME OF ADDITIONAL LEGAL OWNER  Gayla R. Schuck  TITY  STATE  ZIP CODE  WA  98072  STATE  ZIP CODE  WA  98072  GRANTE  WA  98072  GRANTE  SIGNATURE OF REGISTERED OWNER(S) OF THIS  VEHICLE AND THIS INFORMATION IS ACCURATE:  Signature of Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title Signature  NOTARY SIGNATURE  Signature			k	4/				
ADDRESS  CITY  STATE  ZIP CODE  WAS 98072  NAME OF ADDITIONAL LEGAL OWNER  CHIAPTER  GAYLA R. Schuck  NAME OF ADDITIONAL LEGAL OWNER  GAYLA R. Schuck  ADDRESS  CITY  STATE  ZIP CODE  WAS 98072  GRANTEE  NAME  Erick William Gilbertson  IDO SOLEMILY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AWARE 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  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STATE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title, IF APPLICABLE  Signature of Additional Registered Owner and Title of Warrant Owner and Title Owner of REGISTERED OWNER  Signature of Additional Registered Owner and Title Company Signature  Signature of Additional Registered Owner and Title Company Signature  Signature of Additional Registered Owner and Title Company Signature  Signature of Additional Registered Owner and Title Company Signature  Signature of Additional Registered Owner and Title Company Regis				getter construction of the			<del></del>	
ADDRESS  23526 57th Ave. SE  Woodinville  WA  98072  WANGE OF LEGAL OWNER CHARLES D. Schuck  ADDRESS  CITY  STATE  WA  98072  WA  98072  STATE  STATE  WA  98072  STATE  STATE  WA  98072  STATE  WA  9807  STATE  WA  98072  STATE  STATE  STATE  STATE  STATE  STATE	Gayla R	. Schuck	<u> </u>					
NAME OF LEGAL OWNER CHAPTLES D. Schuck NAME OF ADDITIONAL LEGAL OWNER Gay1a R. Schuck NADDRESS 23526 57th Ave. SE Woodinviile WA 98072  GRANTEE  NAME Erick William Gilbertson IDO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/ WE AMARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:  Signature of Registered Owner and Title, IF APPLICABLE  NOTARY SIGNATURE  NOTARY SIGNATURE  NOTARY SIGNATURE  State of Washington County of Skagit  OF WASHINGTON THE POSITION OF REGISTERED OWNER  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY SIGNATURE  NOTARY OF AGENT THE POSITION OF REGISTERED OWNER  Signature of NOTARY OR AGENT THE NOTARY OR PRINTED  AND COUNTY OF THE NOTARY  NOTARY OR PRINTED  THE NOTARY OR PRINTED  THE COMPANY PHONE NUMBER  FIRST AMERICAN TITLE COMPANY PHONE NUMBER  VICIAL HOFFMan  First American Title Company 360-293-5423  SIGNATURE POSITION  Escrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  NAME (TYPED OR PRINTED)  SALE PRINTED AND OF THE STACK OF THE PRINTED AND OR PRINTED  SIGNATURE POSITION  THE MANUEL PROSITION  Escrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  NAME (TYPED OR PRINTED)  SALE PRINTED PROSITION  WHO THE PROSITION  THE MANUEL PROSITION  THE MANUEL PROSITION  SIGNATURE POSITION  SIGNATURE POSITION  THE MANUEL PROSITION  THE MANUEL PROSITION  SIGNATURE POSITION  THE MANUEL PROSITION  SIGNATURE POSITION  THE MANUEL PROSITION  SIGNATURE POSITION  THE MANUEL PROSITION  THE MANUEL PR	ADDRESS			CITY		STAT	E ZIP CODE	
Charles D. Schuck  NAME OF ADDITIONAL LEGAL OWNER  Gayla R. Schuck  ADDRESS  23526 57th Ave. SE  Woodinville  WA  98072  GRANTE  WA  98072  GRANTE  Erick William Gilbertson  IDO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/WE AWARE THE REGISTERED OWNER(S) OF THIS  VEHICLE AND THIS INFORMATION IS ACCURATE:  Signature of Additional Registered Owner and Title, IF APPLICABLE  WIGH AA. S  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIMPRISTAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  WOTARY SIMPRISTAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signature of Registered Owner and Title, IF APPLICABLE  WOTARY SIMPRISTAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signature Of Registered Owner and Title, IF APPLICABLE  WOTARY OR AGENT  THE OWNER(S) SIGNATURE  Signature Of Registered Owner  PRINTED NAME OF REGISTERED OWNER  PRIN	23526 57th	Ave. SE		Woodinvil	le	WA	98072	
NAME OF ADDITIONAL LEGAL OWNER  Gayla R. Schuck  ADDRESS  CITY  STATE ZIP CODE  WA 98072  GRANTEE  NAME  ETICK WIlliam Gilbertson  IDO SOLEMBLY 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  NOTARY SKIMBRITAMP  NO	NAME OF LEGAL OWNER				μħ			
Gayla R. Schuck  ADDRESS  CITY  STATE  ZIP CODE  ADDRESS  CITY  STATE  ZIP CODE  WA  98072  GRANTEE  NAME  ETICK WILLIAM GILDERTSON  IDO 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  WILLIAM SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY SEMBRISTAMP  NOTARY SEMBRISTAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signed or attested Defore me on MAY 20 2005  State of Washington  State of Washington  County of Skagit  Signature  Signature Of MOTARY OR AGENT  THE COMPANY CERTIFICATION  County/Office No. OR  NOTARY OR AGENT  THE COMPANY CERTIFICATION  ITILE COMPANY PHONE NUMBER  VICKI Hoffman  First American Title Company  SIGNATURE POSITION  Eacrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  I certify that:  THE COMPANY PHONE NUMBER  TITLE COMPANY PHONE NUMBER  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  SIGNATURE (POSITION  The manufactured home has been affixed to the real property as described.  I certify that:  The manufactured home has been affixed to the real property as described.  I certify that:  THE COMPANY PHONE NUMBER  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  SIGNATURE (POSITION  STATE VILLE PROPERTY PHONE WILL BE ADDRESS AND BEAUTY OF THE PROPERTY AGENT WILL BE ADDRESS AND BEAUTY OF THE PROPERTY AGENT WILL BE ADDRESS AND BEAUTY AGENT	Charles D. S	chuck		- Market	<u> </u>		*******	
ADDRESS 23526 57th Ave. SE Woodinville WA 98072  GRANTEE  CITY WA 98072  GRANTEE  GRANTEE  BY  CITY WOOD AND A 98072  GRANTEE  WA 98072  GRANTEE  CITY WOOD AND A 98072  GRANTEE  CITY WOOD AND A 98072  GRANTEE  CITY WOOD AND A 98072  GRANTEE  CITY WA 98072  GRANTEE  WA 98072  GRANTEE  CITY WA 98072  GRANTEE  WA 98072  GRANTEE  CITY WA 98072  COUNTRICE  COMPANY CARTEE  COMPANY PRONE NO. OR 11 TO 7  Notary Expiration Date  VICKI Hoffman  FIRST American Title Company 360-293-5423  GRANTUBE POSITION  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 PPONE NUMBER  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application by the a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application by the a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application by the a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application by the all censing Agent within 10 calendar days of the date Title Company Representative signs.  Finalize this application by the al				and the state of t				
GRANTEE  NAME  ETICK WILLIAM GILBERTSON  IDO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I/WE AWARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:  Signature of Registered Owner and Title, IF APPLICABLE  NOTARY SEMBILISM STAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY SEMBILISM STAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signed or attested before me on MAY 20, 2005  EXP. 11-7-07 Z  EDY  Charles D. Schuck  PRINT NAME OF REGISTERED OWNER  SIGNATURE  NOTARY OR AGENT  THE NAME OF REGISTERED OWNER  PRINT NAME OF REGISTERED OWNER  THE NAME OF REGISTERED OWNER  PRINT NAME OF REGISTERED OWNER  THE NAME OF REGISTERED OWNER  PRINT NAME OF REGISTERED OWNER  THE NAME OF REGISTERED OWNER  PRINT NAME OF REGISTERED OWNER  THE NAME OF REGISTERED OWNER  NOTARY OR AGENT  THE COMPANY PHONE NUMBER  FIRST AMERICAN TITLE COMPANY 7 PHONE NUMBER  VICKI HOFFman  First American Title Company 360-293-5423  DATE  SIGNATURE POSITION  THE MANUAL STATE OWNER OF THE PRINTED OWNER OF THE PRINTED OWNER OF THE PRINTED OWNER		uck						
GRANTEE  NAME  ETIC: WILLIAM GILDERTSON  TOO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AMVARE 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  NOTARY SENIORS STAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signed or attested Defore me on MAY AO, AOU'S  State of Washington County of Skagit  State of Washington County of Skagit  Signature A. S. Signature A. Signature A. Signature A. Signature A. S. Signatur	ADDRESS						-	
ETICK WILLIAM GILDER 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  NOTARY SEMINARY STAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARY STAMP  NOTARIZATION/CERTIFICATION/FOR REGISTERED OWNER(S) SIGNATURE  Signature  Signed or attested  Signed or attested  County of Skagit  Signature  County/Office No. OR  PRINT NAME OF REGISTERED OWNER  TAMARA A SATIK  County/Office No. OR  NOTARY OR AGENT  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  FIRST American Title Company 360-293-5423  DATE  ESCROW Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  I certify that:    The manufactured home has been affixed to the real property as described.   AMERICAN AM	23526 57th A	ve. SE		Woodinvil	le	WA	98072	
Vicki Hoffman  First American Title Company 360-293-5423  DATE  SIGNATURE / POSITION  Escrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  I certify that:  a building permit 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 # 360/536-BLDG PERMIT #  HELD	VEHICLE AND THIS Signature	of Registered C	N IS ACCURATE wner and Title, IF	i: //	1 1	HE REGISTERE	ED OWNER(S) C	OF THIS
Vicki Hoffman  First American Title Company 360-293-5423  DATE  SIGNATURE / POSITION  Escrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  I certify that:  a building permit 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 # 360/536-BLDG PERMIT #  HELD	Signature of Addition	nal Registered C	wner and Title, 1F		C4[C4	X XI	will	
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Vicki Hoffman  First American Title Company 360-293-5423  DATE  SIGNATURE / POSITION  Escrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  I certify that:  a building permit 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 # 360/536-BLDG PERMIT #  HELD	WHITE A A.	Sally Ste	ate of Washington	01	<i>(</i>			2005
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Vicki Hoffman  First American Title Company 360-293-5423  DATE  SIGNATURE / POSITION  Escrow Closer/LPO/Manager  Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  BUILDING PERMIT OFFICE CERTIFICATION  I certify that:  a building permit 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 # 360/536-BLDG PERMIT #  HELD	NAME (TYPED OR PRINT	ED)						V VV
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.  5 BUILDING PERMIT OFFICE CERTIFICATION  1 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 # 340/536 BLDG PERMIT #				t American T	itle Cor	прапу 360	-293-5423 DAJE	
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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)   GLDG PERMIT OFFICE/PHONE # 360/536- BLDG PERMIT # # 13279	Finalize this applica	ation with a Lic	ensing Agent wi	ithin 10 calendar day	s of the date	a Title Company	Representativ	e signs.
NAME (TYPED OR PRINTED)  PLOG PERMIT OFFICE/PHONE # 340/536-BLDG PERMIT #  154 AMPBELL, SKALIT COUNTY LANDING 9410  #13279		MIT OFFICE CE	RTIFICATION				,	
TISH CAMPBELL, SKALIT COUNTY PLANNING 9410 #13279	I certify that:	the manufac	tured home has b ermit has been iss	peen affixed to the reasoned for this purpose a	and the attac	described. hment will be ins	pected upon con	pletion.
	1		$\varsigma \dots / \! /$		240	410 BLD	# 132	19
	/ / / / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	unshel	Il Leru	it Tech	niera		05/23/	65

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And the second of the second o	
IGNATURE OF LEGAL OWNER	
GNATURE OF LEGAL OWNER INDICATES CONSENT FO	OR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.
Signature of Legal Owner and Title, IF APPLICABLE	Charles D. School
	Charles D. Schuck
nature of Additional Legal Owner and Title, IF APPLICABLE	Stuff & Schull
NOTARY SEALCH MANNER  NOTARY SEALCH MANNER  State of Washington  County of Skag  Charles D. Sch  PRINT NAME OF LEGAL OWNE  DEALERSHIP POSITION/AGEN	CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE
State of Washington	Signed or attested MAY 20, 2005 before me on MAY 20, 2005
County of Skag	
EL Charles D. Sch	Signature Tamaza (1 Setter
EXP. 11-7-07 E PRINT NAME OF LEGAL OWNE	R NOTARY OR AGENT
OBLIC AND BAYTA R. Schuc	TAMARA A. SATKS
PRINT NAME OF CEGAL OWNE	PRINTED NAME OF NOTARY  County/Office No. OR
WASTININ Title Notary	AND: Dealer No. OR 11/7/07
DEALERSHIP POSITION/AGEN	
LAND DESCRIPTION (A legal description of the land ca	n be obtained from the local County Assessor's Office
Lot 39, Block 3, "HOLIDAY HIDEAWAY	
Volume 8 of Plats, pages 36 through	n 42, records of Skagit County,
Washington.	
No. 1	No.
***	
DEALER'S REPORT OF SALE	
	VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN.
ANY REQUIRED SALES TAX HAS BEEN COLLECTED.	And the state of t
LER NAME (TYPED OR PRINTED)	WA DEALER NUMBER DATE OF SALE
TAX JURISDICTION/TAX RATE DEALER'S	S AUTHORIZED SIGNATURE
LISE TAY EYEMPT Sole to a Cartified Tribal member	on the reservation (attach notarized statement of delivery).
COUNTY AUDITOR/AGENT LICENSING OFFICE APPRO	
	d correctly, and the applicant has sufficient documentation to proceed with
recording of this form.	A STATE OF THE STA
ME (TYPED OR PRINTED)	COUNTY OFFICENES OPERATOR NUMBER
padrison ung lo	$\frac{1}{2}$
NATURE	PAT 14 14 14 11
TITLE FEES	
NG FEE APPLICATION MOBILE HOME FEE	ELIMINATION FEE USE TAX SUBAGENT FEES
	TOTAL SEED STAY
	TOTAL FEES & TAX
IMPORTANT: Open the application has been	approved by the County Auditor ( Vehicle
	approved by the County Auditor / Vehicle ication form to the County Recording Office.
	es paid. If the Recording Office retains
	otain a certified copy of the recorded form.
ADDI ICANTO	A seture to a Vahiala I include a file of the set of th
	st return to a Vehicle Licensing office to file the plication, paying all required fees. Vehicle
licensing subagents cha	
	. →

The Department of Licensing has a polir if you need special accommodation, pl

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.

