



200511090059

Skagit County Auditor

RETURN ADDRESS

11/9/2005 Page

1 of

2 11:47AM

Wells Fargo Escrow


1509A Riverside Drive

Mount Vernon, WA 98273

Escrow # 04-01487-05

LAND TITLE OF SKAGIT COUNTY

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
NEW	04	FLTWD	66 X 40	WAFL331182208A13	
2 LAND					
LEGAL DESCRIPTION ON PAGE				REAL PROPERTY TAX PARCEL NUMBER	
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				360226-3-030-0100	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
2		S/P PLOS-0132	26-36-2		
see back of this form for full legal					
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		2		1	
NAME OF REGISTERED OWNER					
Skipper C. Halgren					
NAME OF ADDITIONAL REGISTERED OWNER					
Barbara A. Halgren					
ADDRESS		CITY		STATE	ZIP CODE
4919 G. Loop Road		Bow		WA	98232
NAME OF LEGAL OWNER					
Wells Fargo Bank, N.A.					
NAME OF ADDITIONAL LEGAL OWNER					
n/a					
ADDRESS		CITY		STATE	ZIP CODE
1509A Riverside Drive		Mount Vernon		WA	98273
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 <u>Skipper C. Halgren</u>					
Skipper C. Halgren, By Barbara A. Halgren, Power of Attorney					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Barbara A. Halgren</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington			
		County of <u>Skagit</u>			
		Signed or attested before me on <u>11-7-05</u>			
		by <u>Skipper C. Halgren, By POA</u> Signature <u>Kelli A. Mayo</u>			
		PRINT NAME OF REGISTERED OWNER Barbara A. Halgren by <u>Barbara A. Halgren</u> PRINT NAME OF REGISTERED OWNER Kelli A. Mayo PRINTED NAME OF NOTARY County/Office No. OR AND: Dealer No. OR 6-19-09 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: <input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described. <input type="checkbox"/> 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 # 360 336-9410		BLDG PERMIT #	
Elaine Pitman		Skagit Co. Planning		BP05-0899	
SIGNATURE / POSITION				DATE	
Elaine Pitman, Permit Technician				11-08-05	

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 <u>Tammy L. Zimmerman Branch Manager</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington _____ County of <u>Skagit</u>		Signed or attested before me on <u>11-7-05</u>	
		by <u>Tammy L. Zimmerman</u> PRINT NAME OF LEGAL OWNER		Signature <u>[Signature]</u> NOTARY OR AGENT	
		by _____ PRINT NAME OF LEGAL OWNER		<u>Kelli A. Mayo</u> PRINTED NAME OF NOTARY	
		Title <u>Notary Public</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR <u>6-19-09</u> Notary Expiration Date	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 2, Short Plat No. PL05-0132, approved September 29, 2005 and Sept. 22, 2005, recorded Sept. 30, 2005, under Auditor's File No. 200509300028, records of Skagit County, Washington; being a portion of Government Lot 4, Section 26, Township 36 North, Range 2 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) <u>Coach Corral</u>			WA DEALER NUMBER <u>4278</u>		DATE OF SALE <u>11-9-05</u>
PURCHASE PRICE <u>110,000 -</u>	TAX JURISDICTION/TAX RATE <u>7.9</u>	DEALER'S AUTHORIZED SIGNATURE <u>Linda Milbourn</u>			
<input type="checkbox"/> 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>PEGGY A RIEDELL GRAHAM</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>29-01-04</u>		
SIGNATURE <u>[Signature]</u>			DATE <u>11/9/05</u>		
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>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.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>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.</p> </div> <p>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.</p>					

The Department of Licensing has a pr
If you need special accommodation,)



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