

RETURN ADDRESS

GOLF Escrow Corp.
10100 219th St. SW #440
MCT, WA 98043
E # 20050850



200511150104

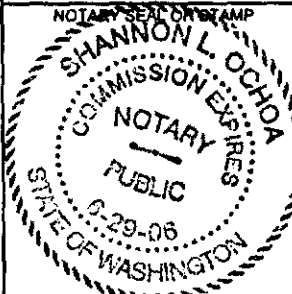
Skagit County Auditor

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3 1:42PM

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 NEW	YEAR 06	MAKE FLTWD	LENGTH/WIDTH (FEET) 44 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) ORFLS48306535C13	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				LEGAL DESCRIPTION ON PAGE _____	
				REAL PROPERTY TAX PARCEL NUMBER 350621-4-021-0100-128140	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE Sec. 21 Township 35 R6 Lot 9		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS 1		NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER Patrick L. Brown		DOL CUSTOMER ACCOUNT NUMBER BROWNPL274CH			
NAME OF ADDITIONAL REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS CITY STATE ZIP CODE 32912 S. Skagit Hwy, Sedro Woolley, WA 98284					
NAME OF LEGAL OWNER GOLF Savings Bank		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS CITY STATE ZIP CODE P.O. Box 5010, Lynnwood, WA 98046					
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 Patrick L. Brown					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Snohomish Signed or attested before me on 9/15/05 by Patrick L. Brown PRINT NAME OF REGISTERED OWNER Signature Shannon L. Ochoa NOTARY OR AGENT SHANNON L. OCHOA PRINTED NAME OF NOTARY Title notary AND: County/Office No. OR Dealer No. OR Notary Expiration Date 6/29/06			
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 #		BLDG PERMIT #	
TISH CAMPBELL - SKAGIT COUNTY PLANNING - 360/336-9410				BL05-0549	
SIGNATURE / POSITION		DATE			
Tish Campbell, Permit Technician		11/15/05			

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER NEW	YEAR 06	MAKE FLTWD	LENGTH/WIDTH (FEET) 44 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) ORFLS48306535C13	
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: <i>[Signature]</i>					
Signature of Additional Legal Owner and Title, IF APPLICABLE: _____					
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington County of <i>Snohomish</i>		Signed or attested before me on <i>11/7/05</i>	
		by <i>Maria Parsons,</i> PRINT NAME OF LEGAL OWNER		Signature <i>[Signature]</i> NOTARY OR AGENT	
		by <i>Corporate officer</i> PRINT NAME OF LEGAL OWNER		SHANNON L. OCHOA PRINTED NAME OF NOTARY	
Title <i>notary</i> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR <i>6/29/06</i> Dealer No. OR Notary Expiration Date			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
<i>See Legal Description attached.</i>					
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) COACH CORRAL, INC.			WA DEALER NUMBER 4278	DATE OF SALE 9-23-05	
PURCHASE PRICE 59495-	TAX JURISDICTION/TAX RATE 7.9	DEALER'S AUTHORIZED SIGNATURE <i>Linda Milbourn</i>			
<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) <i>Hussey Lerwey</i>			COUNTY OFFICE/VEHICLE OPERATOR NUMBER <i>290108</i>		
SIGNATURE <i>Hussey Lerwey</i>			DATE <i>11/15/05</i>		
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 accommodation, please call 1-800-541-5900.





MANUFACTURED HOME APPLICATION ADDITIONAL ATTACHMENT

Legal Description of Land

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

LAND: PROPERTY TAX PARCEL NUMBER:

350621-4-021-0100

LEGAL DESCRIPTION:

The East ½ of Government Lot 9, Section 21, Township 35 North, Range 6 East of the Willamette Meridian;

EXCEPT the East 332.46 feet thereof as measured along the South line of said Government Lot 9, and lying South of the South Skagit Highway;

AND EXCEPT that portion lying South of a line described as follows:

Beginning at a point on the East line of the above described tract that is 260.14 feet North of the Southeast corner thereof; thence Northwesterly to a point on the West line of said tract that is North 370.14 feet from the Southwest corner of said above described tract and terminus point of line.

(Also known as the Northerly portion of Parcels A and B of Skagit County Short Plat No. 17.72).



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