

First American



200511300063  
Skagit County Auditor

11/30/2005 Page 1 of 2 11:25AM

RETURN ADDRESS

Crystal J. Darsch  
PO Box 503  
Concrete, WA 98237

STATE OF WASHINGTON Department of Licensing **MANUFACTURED HOME APPLICATION** PLEASE CHECK ONE

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)  
2005 Palm Harbor 48 X 13 PH 207592

2 LAND LEGAL DESCRIPTION ON PAGE  
MANUFACTURED HOME WILL BE  AFFIXED  REMOVED REAL PROPERTY TAX PARCEL NUMBER 3877-000-111-0000 Plat 4177  
LOT 111 BLOCK PLAT NAME OR SECTION/TOWNSHIP/RANGE Cedar Grove on the Skagit QUARTER/QUARTER SECTION

3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE  
COUNTY NUMBER NUMBER OF REGISTERED OWNERS NUMBER OF LEGAL OWNERS  
NAME OF REGISTERED OWNER Crystal J. Darsch DOL CUSTOMER ACCOUNT NUMBER  
NAME OF ADDITIONAL REGISTERED OWNER DOL CUSTOMER ACCOUNT NUMBER  
ADDRESS Po Box 503 CITY Concrete STATE WA ZIP CODE 98237  
NAME OF LEGAL OWNER Same As Registered DOL CUSTOMER ACCOUNT NUMBER  
NAME OF ADDITIONAL LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER  
ADDRESS CITY STATE ZIP CODE

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 Crystal J. Darsch  
Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE  
State of Washington Skagit Signed or attested before me on 3-15-05  
County of  
by Crystal J. Darsch Signature Katio E Hickett  
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT  
by Katio E Hickett  
PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY  
Title Notary AND: County/Office No. OR 1707  
Dealer No. OR  
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:  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 # 360 BLDG PERMIT #  
Elaine Pitman Skagit County Planning 336-9410 BP04-1107  
SIGNATURE / POSITION DATE  
Elaine Pitman, Permit Technician 11-29-05

**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 \_\_\_\_\_

Signature of Additional Legal Owner and Title, IF APPLICABLE \_\_\_\_\_

NOTARY SEAL OR STAMP	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>	
	State of Washington	Signed or attested
	County of _____	before me on _____
	by <u>Crystal J. Darisch</u> Signature _____	NOTARY OR AGENT
	PRINT NAME OF LEGAL OWNER	
by _____	PRINTED NAME OF NOTARY	
PRINT NAME OF LEGAL OWNER	County/Office No. OR	
Title _____	AND: Dealer No. OR	
DEALERSHIP POSITION/AGENT/NOTARY	Notary Expiration Date	

**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's**

Lot III, "CEDAR GROVE ON THE SKAGIT," according to the plat thereof, recorded in Volume 9 of Plats, pages 48 through 51, records of Skagit County, Washington.

**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>PALM HARBOR</u>	WA DEALER NUMBER <u>4511</u>	DATE OF SALE <u>3-18-05</u>
PURCHASE PRICE <u>53,000</u>	TAX JURISDICTION/TAX RATE <u>7.7%</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>
<input type="checkbox"/> <b>USE TAX EXEMPT</b> 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>MacCrea</u>	COUNTY OFFICER/AGENT OPERATOR NUMBER <u>2901-21</u>
SIGNATURE <u>[Signature]</u>	DATE <u>11/30/05</u>

**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 1-800-541-5200.

