



200512050127

Skagit County Auditor

RETURN ADDRESS

12/5/2005 Page

1 of

2 11:26AM

Jim Boyd
9120 E Pressentin Dr
Ed Concrete WA 98237

B185894

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)	
	1995	MODULINE	60 X 28	ED17408B 117408	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 3969-000-021-0008 P68131					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
21		Pressentin Creek Wilderness Div #2			
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					
James C. Boyd					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL REGISTERED OWNER					
Patty J. Boyd					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS					
9120 E. Pressentin Dr					
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					
X James C. Boyd					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
X Patty J. Boyd					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of Skagit		before me on 12-2-05	
		by James C. Boyd		Signature	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Patty J. Boyd		Signature	
PRINT NAME OF REGISTERED OWNER		Katie E. Hickok		PRINTED NAME OF NOTARY	
Title Notary		AND: County/Office No. OR		1207	
DEALERSHIP POSITION/AGENT/NOTARY		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: <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				97-1456	
SIGNATURE / POSITION				DATE	
Tish Campbell, Permit Technician				12/02/05	

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

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATUREState of Washington
County of _____Signed or attested
before me on _____by _____
PRINT NAME OF LEGAL OWNERSignature _____
NOTARY OR AGENTby _____
PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title _____
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's**

Lot 21, Pressentin Creek Wilderness, Division No. 2,
according to the Plat thereof recorded in Volume 9
of Plats, pages 38 and 39, records of Skagit
County, Washington.

8 DEALER'S REPORT OF SALEI 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)

WA DEALER NUMBER

DATE OF SALE

PURCHASE PRICE

TAX JURISDICTION/TAX RATE

DEALER'S AUTHORIZED SIGNATURE

☐ **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)

COUNTY OFFICE/VEHICLE OPERATOR NUMBER

SIGNATURE

DATE

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 _____

200512050127
Skagit County Auditor