



200512140002  
Skagit County Auditor

12/14/2005 Page 1 of 3 8:34AM

Document Title: MOBILE HOME ELIMINATION

Reference Number: 115345-S LAND TITLE OF SKAGIT COUNTY

Grantor(s):  additional grantor names on page \_\_\_

1. Shirley Hudson

2.

Grantee(s):  additional grantee names on page \_\_\_

1. Washington State of

2.

Abbreviated legal description:  full legal on page(s) 3.

Lot D Kiket View

Assessor Parcel / Tax ID Number:  additional tax parcel number(s) on page 2

P66253

I, Karan Thorson, am hereby requesting an emergency non-standard recording for an additional fee provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some part of the text of the original document. Recording fee is \$32.00 for the first page, \$1.00 per page thereafter per document. In addition to the standard fee, an emergency recording fee of \$50.00 is assessed. This statement is to become part of the recorded document.

Signed Karan Thorson Dated 12-9-05

115345-5



# MANUFACTURED HOME APPLICATION

PLEASE CHECK ONE

- TITLE ELIMINATION
- TRANSFER IN LOCATION
- 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 +63175	YEAR 86	MAKE GLENB	LENGTH/WIDTH(FEET) 60X28	VEHICLE IDENTIFICATION NUMBER (VIN) DFLGP2AF500405122
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### 2 LAND

LEGAL DESCRIPTION ON PAGE 3

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER: 3935-000-004-000-166253

LOT D	BLOCK	PLAT NAME Assessor's Plat of Kiker View	SECTION/TOWNSHIP/RANGE V9, Pg 95
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### 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER  
SHIRLEY D. HUSON TRUST dated 4/17/1990

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS: 20302 44th NE LAKE FOREST PARK WA 98155

NAME OF LEGAL OWNER

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE

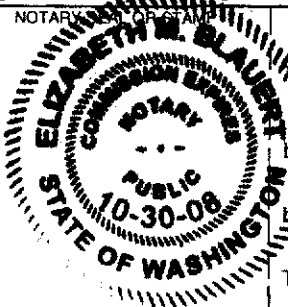
### GRANTEE

NAME  
N/A

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: *Shirley D. Huson*

Signature of Additional Registered Owner and Title, IF APPLICABLE



### NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of KING Signed or attested before me on July 13, 2005

by Shirley D. Huson Signature: *[Signature]*  
PRINT NAME OF REGISTERED OWNER trustee NOTARY OR AGENT

PRINT NAME OF REGISTERED OWNER Elizabeth R. Blauret  
PRINTED NAME OF NOTARY

Title AND: County/Office No. OR Dealer No. OR Notary Expiration Date 10-30-08

### 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 # BLDG PERMIT #

TISH CAMPBELL - SKAGIT COUNTY PLANNING - 360/336-4410 #17100

SIGNATURE / POSITION DATE

Tish Campbell Permit Technician 12/09/05



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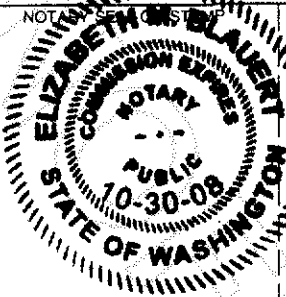
6 SIGNATURE OF LEGAL OWNER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

*Shirley D. Huson*

Signature of Agent, Legal Owner and Title, IF APPLICABLE



NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington  
County of KING

Signed or attested before me on July 13, 2005

by Shirley D. Huson  
PRINT NAME OF LEGAL OWNER Trustee

Signature [Signature]  
NOTARY OR AGENT

PRINT NAME OF LEGAL OWNER

Elizabeth M. Blauert  
PRINTED NAME OF NOTARY

Title  
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR  
Dealer No. OR  
Notary Expiration Date 10-30-08

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

Lot "D", Assessor's Plat of KIKET VIEW, as per plat recorded in Volume 9 of Plats, Pg 95, records of SKAGIT COUNTY, WASHINGTON; together with a non-exclusive easement for ingress and egress over the south 25 feet of tracts B, E, F, G, and H in said plat. Also together with an undivided 1/6th interest

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)	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/VFS OPERATOR NUMBER
<u>Rusty Lowery</u>	<u>290108</u>
SIGNATURE	DATE
<u>Rusty Lowery</u>	<u>12/13/05</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  
If you need special accommodation, please



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