

RETURN ADDRESS

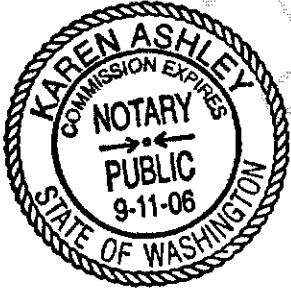
Land Title Company
P.O. Box 445
Burlington, WA 98233



200512230167
Skagit County Auditor

12/23/2005 Page 1 of 2 3:52PM

STATE OF WASHINGTON Department of		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
Licensing				<input 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 (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2003	Fleetwood	48/27	ORFL348A- 6-B 29462-L513	
2 LAND		LEGAL DESCRIPTION ON PAGE			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED	<input type="checkbox"/> REMOVED	REAL PROPERTY TAX PARCEL NUMBER	
Lot 6 Cascade Heights				4667-000-006-0000, P108155	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)		ADDITIONAL NAMES ON PAGE			
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		1		
NAME OF REGISTERED OWNER					
Patricia Louise McLucas					
NAME OF ADDITIONAL REGISTERED OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
7393 N. Reitze Avenue		Concrete	WA	98237	
NAME OF LEGAL OWNER					
Dietrich Construction Company, LLC					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
9932 Collins Road		Sedro-Woolley	WA	98284	
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 <i>Patricia Louise McLucas</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP					
NOTARIZATION/CERTIFICATION					
State of Washington		Signed or attested			
County of Skagit		before me on January 10, 2005			
by	Patricia Louise McLucas	Signature <i>Karen Ashley</i>			
	Printed Name of Registered Owner	NOTARY OR AGENT			
by		Karen Ashley			
	Printed Name of Registered Owner	PRINTED NAME OF NOTARY			
Title		County/Office No. OR 9/11/06			
Escrow Officer		AND: Dealer No. OR			
DEALERSHIP POSITION/AGENT/NOTARY		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			
Karen Ashley		360-707-2312			
SIGNATURE/POSITION		DATE			
<i>Karen Ashley</i> Escrow Officer		1-10-05			
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 #		
JAMCOZMICK		TOWN OF CUMBER 853-8401		03-019		
SIGNATURE/POSITION		DATE				
JAMCOZMICK BUILDING OFFICIAL		9-23-05				
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>Don Dietrich</u>						
Signature of Additional Legal Owner and Title, IF APPLICABLE _____						
NOTARY SEAL OR STAMP						
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE						
			State of Washington		Signed or attested before me on <u>9/19/05</u>	
			County of <u>Skagit</u>			
			by <u>Rowland Dean Dietrich,</u>		Signature <u>Karen Ashley</u>	
			Managing Member		NOTARY OR AGENT	
			Printed Name of Legal Owner		Karen Ashley	
			by <u>DIETRICH CONSTRUCTION CO. LLC</u>		PRINTED NAME OF NOTARY	
			Printed Name of Legal Owner		County/Office No. <u>OR</u>	
			Title <u>Escrow Officer</u>		AND: Dealer No. <u>OR</u>	
			DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date <u>9/11/06</u>	
7	LAND DESCRIPTION					
Lot 6, , Cascade Heights, County of Skagit, State of WA.						
8	DEALER'S REPORT OF SALE					
I CERTIFY THAT THIS INFORMATION IS CORRECT, THE VEHICLES 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	
Meridian Home Center, Inc			4398		6/28/03	
PURCHASE PRICE		TAX JURISDICTION/TAX RATE		DEALER'S AUTHORIZED SIGNATURE		
\$36,698.00		13009.23 8.2%		<u>[Signature]</u>		
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/AFS OPERATOR NUMBER		
Rusby Lerwey				290108		
SIGNATURE				DATE		
<u>Rusby Lerwey</u>				12/23/08		
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.						
<div style="border: 1px solid black; padding: 5px;"> 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. </div>						
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 p
If you need special accommodation, please



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