

RETURN ADDRESS

Argent Mortgage Co.

2603 Main Street

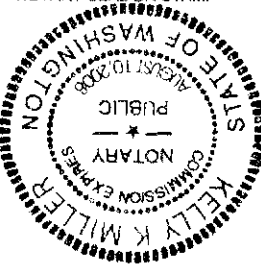
Irvine, CA 92614

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CHICAGO TITLE IC34461

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)	
&126288	1998	CHAMP	66 X 28	16984946375	
2 LAND					
LEGAL DESCRIPTION ON PAGE 3					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER P100924					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
1		Skagit County Short Plat 91-071			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
DAVID A. RYDER			RYDERDA439NZ		
NAME OF ADDITIONAL REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
SHANNON RICHARDSON			RICHANSS02R8		
ADDRESS		CITY	STATE	ZIP CODE	
44101 Eagle Rock Lane		Concrete	WA	98237	
NAME OF LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
AGRENT MORTGAGE COMPANY, LLC					
NAME OF ADDITIONAL LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
ADDRESS		CITY	STATE	ZIP CODE	
2603 Main Street		Irvine	CA	92614	
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>David Ryder</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY SEAL OR STAMP		State of Washington County of Skagit			
		Signed or attested before me on 2-21-04			
		by David A. Ryder PRINT NAME OF REGISTERED OWNER			
		Signature <i>Shannon Richardson</i> PRINTED NAME OF NOTARY			
		by Shannon Richardson PRINT NAME OF REGISTERED OWNER			
		Title notary DEALERSHIP POSITION/AGENT/NOTARY			
		AND: County/Office No. OR Dealer No. OR 8-10-08 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 #	
Georgine Basson Skagit County Planning		336-9410		96-0680	
SIGNATURE / POSITION		DATE			
<i>Georgine Basson</i> Permit Technician		3/17/06			

MANUFACTURED HOME - FROM SECTION 1

TPO/PLATE NUMBER &126288	YEAR 1998	MAKE CHAMP	LENGTH/WIDTH(FEET) 66 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 16984946375
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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 _____

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington
County of _____

Signed or attested
before me on _____

by _____
PRINT NAME OF LEGAL OWNER

Signature _____
NOTARY OR AGENT

by _____
PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY

Title _____
DEALERSHIP POSITION/AGENT/NOTARY

AND: 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 Office)

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 _____

SIGNATURE _____

DATE _____

10 TITLE FEES

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUB AGENT FEES
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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
If you need special accommodation,



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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 type of application: ☒ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

Land: Property Tax Parcel Number 350809-0-004-0206 P100924

Legal Description:

Lot 1 of SKAGIT COUNTY SHORT PLAT NO. 91-071, as approved February 11, 1994, and recorded February 11, 1994, in Volume 11 of Short Plats, page 59, under Auditor's File No. 9402110125, records of Skagit County, Washington; being a portion of Government Lot 7 in Section 9, Township 35 North, Range 8 East of the Willamette Meridian;

EXCEPT that portion of Lot 1 of Skagit County Short Plat No. 91-071, as approved February 11, 1994, and recorded February 11, 1994, in Volume 11 of Short Plats, page 59, under Auditor's File No. 9402110125, records of Skagit County, Washington, lying Southwesterly of the following described line:

Beginning at a point on the North line of said Lot 3, Skagit County Short Plat No. 91-104, which lies 253.99 feet from the intersection of said North line with the East line of Logsdon Lane, as shown on said short plat;

Thence South 36°51'43" East, a distance of 624.58 feet to a point on the South line of said Lot 1, Skagit County Short Plat No. 91-071, which is 407.60 feet from the intersection of said South line with the North line of the South Skagit Highway and terminus of this line description;

AND EXCEPT that portion lying within Logsdon Lane as shown on the Plat of Eagle Hill, according to the plat thereof recorded in Volume 16 of Plats, pages 67 and 68, records of Skagit County, Washington.

Situated in Skagit County, Washington.



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OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. 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 TYPE OF APPLICATION: ☐ Title Elimination
☐ Removal From Real Property
☐ Transfer In Location

PROPERTY TAX PARCEL NUMBER:

ADDITIONAL GRANTOR(S) REGISTERED / LEGAL OWNER(S)	
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE:	
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
SIGNATURE OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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) I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY LAW THAT I/WE ARE THE REGISTERED OWNERS OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:	
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
NOTARY SEAL OR STAMP	NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE <div style="display: flex; justify-content: space-between; margin-top: 5px;"><div>State of Washington County of _____</div><div>Signed or attested before me on _____</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>by _____ Printed Name of Applicant</div><div>Signature _____</div></div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"><div>Title _____ DEALERSHIP Position/Agent/NOTARY</div><div>Dealer No. OR AND: County/Office No. OR Notary Expiration Date _____</div></div>

*The Department of Licensing
If you need special accomn*



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ALL-PURPOSE ACKNOWLEDGEMENT

State of California. (

County of Orange)

On 4-15-05 before me, Brent Seehusen, Notary Public
Date Name and Title of Officer (i.e., Your Name, Notary Public)

personally appeared Destinee Hoffman
Name(s) of Document Signer(s)

personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(es) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signatures(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Bto Sh

Signature of Notary



(Affix seal in the above blank space)



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