

RETURN ADDRESS

Joyce M. Ramey

11132 3rd Street

Mount Vernon, WA 98273

121010-SE AF



200605230099

Skagit County Auditor

5/23/2006 Page 1 of 2 3:51PM

LAND TITLE OF SKAGIT COUNTY

| 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) | | | | <input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY | |
| 1 MANUFACTURED HOME | | | | | |
| TPO / PLATE NUMBER | YEAR | MAKE | LENGTH/WIDTH(FEET) | VEHICLE IDENTIFICATION NUMBER (VIN) | |
| +0999925 | 1996 | Fleetwood | 44 X 28 | WAFLT31B14209WC13 | |
| 2 LAND | | | | | |
| MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED | | | LEGAL DESCRIPTION ON PAGE _____ | | |
| | | | REAL PROPERTY TAX PARCEL NUMBER 4068-008-005-0009 | | |
| LOT | BLOCK | PLAT NAME | | SECTION/TOWNSHIP/RANGE | |
| 4 and 5 | 8 | Addition to Bay View, Wash. | | | |
| 3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) | | | | | |
| COUNTY NUMBER | NUMBER OF REGISTERED OWNERS | | NUMBER OF LEGAL OWNERS | | |
| | 1 | | 1 | | |
| NAME OF REGISTERED OWNER Joyce M. Ramey | | | | | |
| NAME OF ADDITIONAL REGISTERED OWNER Douglas S. Ramey | | | | | |
| ADDRESS | | CITY | STATE | ZIP CODE | |
| 11132 3rd Street | | Mount Vernon | WA | 98273 | |
| NAME OF LEGAL OWNER Same as Registered Owner | | | | | |
| NAME OF ADDITIONAL LEGAL OWNER | | | | | |
| 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 <i>Joyce M. Ramey</i> | | | | | |
| Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Douglas S. Ramey</i> | | | | | |
| NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE | | | | | |
| State of Washington | | County of Skagit | | Signed or attested before me on 5/22/06 | |
| by Joyce M. Ramey | | Signature <i>Anneliese Maria Farrell</i> | | NOTARY OR AGENT | |
| PRINT NAME OF REGISTERED OWNER | | Anneliese Maria Farrell | | | |
| by Douglas M. Ramey | | PRINTED NAME OF NOTARY | | | |
| PRINT NAME OF REGISTERED OWNER | | County/Office No. OR Dealer No. OR Notary Expiration Date 6/28/08 | | | |
| Title Notary | | AND: | | | |
| DEALERSHIP POSITION/AGENT/NOTARY | | | | | |
| 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 | | DATE | |
| Anneliese Maria Farrell | | Land Title Company 360-707-2312 | | 5/22/06 | |
| SIGNATURE / POSITION | | Escrow Closer/Notary | | | |
| <i>Anneliese Maria Farrell</i> | | | | | |
| 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 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 # | |
| Cindy Gauthier | | 360-336-9410 | | 96-0356 | |
| SIGNATURE / POSITION | | Skagit County Planning & Development | | DATE | |
| <i>Cindy Gauthier</i> | | | | 5-23-06 | |

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 County/Office No. OR Dealer No. OR |
| | Title _____ DEALERSHIP POSITION/AGENT/NOTARY | AND: Notary Expiration Date _____ |

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

Lots 4 and 5, Block 8, "ADDITION TO BAY VIEW, WASH.," as per plat recorded in Volume 1 of Plats, page 11, records of Skagit County, Washington. Situate in the County of Skagit, State of 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) | | 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 <i>J Moore</i> | DATE <i>5-23-06</i> |

| | | | | | |
|----------------------|-------------|-----------------|-----------------|---------|------------------|
| 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 1-800-541-5900.



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Skagit County Auditor