

## RETURN ADDRESS

Joyce M. Ramey  
 11132 3rd Street  
 Mount Vernon, WA 98273

200605230099  
 Skagit County Auditor

5/23/2006 Page

1 of 2 3:51PM

121010-SE AF

## LAND TITLE OF SKAGIT COUNTY

MANUFACTURED HOME APPLICATION				PLEASE CHECK ONE
<b>LICENSING</b> STATE OF WASHINGTON Department of Licensing				<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)				
<b>1 MANUFACTURED HOME</b> TPO / PLATE NUMBER <input type="text"/> +0999925    YEAR <input type="text"/> 1996    MAKE <input type="text"/> Fleetwood    LENGTH/WIDTH(FEET) <input type="text"/> 44 X 28    VEHICLE IDENTIFICATION NUMBER (VIN) <input type="text"/> WAFLT31B14209WC13		<b>2 LAND</b> MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED    REAL PROPERTY TAX PARCEL NUMBER <input type="text"/> 4068-008-005-0009 LOT <input type="text"/> 4 and 5    BLOCK <input type="text"/> 8    PLAT NAME <input type="text"/> Addition to Bay View, Wash.    SECTION/TOWNSHIP/RANGE <input type="text"/>		
<b>3 GRANTOR(S), REGISTERED/LEGAL OWNER(S)</b> COUNTY NUMBER <input type="text"/> NAME OF REGISTERED OWNER <input type="text"/> Joyce M. Ramey NAME OF ADDITIONAL REGISTERED OWNER <input type="text"/> Douglas S. Ramey ADDRESS <input type="text"/> 11132 3rd Street    CITY <input type="text"/> Mount Vernon    STATE <input type="text"/> WA    ZIP CODE <input type="text"/> 98273 NAME OF LEGAL OWNER <input type="text"/> Same as Registered Owner NAME OF ADDITIONAL LEGAL OWNER <input type="text"/> ADDRESS <input type="text"/> CITY <input type="text"/> STATE <input type="text"/> ZIP CODE <input type="text"/>		NUMBER OF REGISTERED OWNERS <input type="text"/> 1    NUMBER OF LEGAL OWNERS <input type="text"/> 1 ADDITIONAL NAMES ON PAGE <input type="text"/>		
<b>GRANTEE</b> NAME <input type="text"/> 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 <input type="text"/> Joyce M. Ramey Signature of Additional Registered Owner and Title, IF APPLICABLE <input type="text"/> Douglas S. Ramey NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE NOTARY SEAL OR STAMPS <input checked="" type="checkbox"/> PUBLIC <input type="checkbox"/> APPOINTMENT <input type="checkbox"/> ANNELIESE MARIA FARRELL State of Washington    County of <input type="text"/> Skagit    Signed or attested before me on 5/22/06 JUNE 28, 2008 <input type="text"/> Joyce M. Ramey <input type="text"/> Signature <input type="text"/> by <input type="text"/> Douglas M. Ramey <input type="text"/> NOTARY OR AGENT PRINT NAME OF REGISTERED OWNER <input type="text"/> PRINT NAME OF REGISTERED OWNER <input type="text"/> Title <input type="text"/> Notary <input type="text"/> DEALERSHIP POSITION/AGENT/NOTARY <input type="text"/> ANNELIESE MARIA FARRELL PRINTED NAME OF NOTARY <input type="text"/> County/Office No. OR <input type="text"/> AND: Dealer No. OR <input type="text"/> Notary Expiration Date <input type="text"/> 5/28/08				
<b>4 TITLE COMPANY CERTIFICATION</b> I certify that the legal description of the land and ownership is true and correct per the real property records. NAME (TYPED OR PRINTED) <input type="text"/> Anneliese Maria Farrell    TITLE COMPANY / PHONE NUMBER <input type="text"/> 360-707-2312 SIGNATURE / POSITION <input type="text"/> Escrow Closer/Notary    DATE <input type="text"/> 5/22/06 Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.				
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b> 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) <input type="text"/> Cindy Gauthier    BLDG PERMIT OFFICE/PHONE # <input type="text"/> 360-336-9410    BLDG PERMIT # <input type="text"/> 96-0356 SIGNATURE / POSITION <input type="text"/> Skagit County Planning & Development    DATE <input type="text"/> 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 \_\_\_\_\_ Signature \_\_\_\_\_ NOTARY OR AGENT

by \_\_\_\_\_ PRINTED NAME OF NOTARY  
Title \_\_\_\_\_ County/Office No. OR  
DEALERSHIP POSITION/AGENT/NOTARY AND: 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)**

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 *J. Moore* DATE *2901-26* *5-23-06***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 1-800-543-6000. TDD 1-800-624-1222.*



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