



200605260152  
Skagit County Auditor

5/26/2006 Page 1 of 2 12:59PM

RETURN ADDRESS

Joel W. and Karen K. Sloth  
46408 Baker Loop Road  
Concrete, WA 98237  
119194-SE

**STATE OF WASHINGTON Department of Licensing** **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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	2006	SKYLINE	28 X 44	9U-91-0496-U

**2 LAND** LEGAL DESCRIPTION ON PAGE \_\_\_\_\_

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER: 3877-000-114-0007/P64180

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
		CEDARGROVE ON THE SKAGIT	

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** ADDITIONAL NAMES ON PAGE \_\_\_\_\_

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	2 (Two)	2 (Two)

NAME OF REGISTERED OWNER: Joel W. Sloth

NAME OF ADDITIONAL REGISTERED OWNER: Karen K. Sloth

ADDRESS: 46408 Baker Loop Road CITY: Concrete STATE: WA ZIP CODE: 98237

NAME OF LEGAL OWNER: Same as Registered Above

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: *Joel W. Sloth*

Signature of Additional Registered Owner and Title, IF APPLICABLE: *Karen K. Sloth*

NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington County of Skagit	Signed or attested before me on 5-26-06
	by Joel W. Sloth PRINT NAME OF REGISTERED OWNER	Signature <i>[Signature]</i> NOTARY OR AGENT
	by Karen K. Sloth PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY A. McDowell
	Title <i>Agent</i> DEALERSHIP POSITION/AGENT/NOTARY	AND: County/Office No. OR Dealer No. OR Notary Expiration Date 2009-22

**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): Shelley Nevitt TITLE COMPANY / PHONE NUMBER: Land Title Company (360)707-2158

SIGNATURE / POSITION: Senior Title Officer DATE: 5/25/06

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): Cindy Gauthier BLDG PERMIT OFFICE/PHONE #: 360-336-9410 BLDG PERMIT #: BPO5-1534

SIGNATURE / POSITION: *[Signature]* Skagit County Planning & Development DATE: 5-26-06

**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 Joel W. Sloth  
Signature of Additional Legal Owner and Title, IF APPLICABLE Karen K. Sloth

NOTARY SEAL OR STAMP

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**

State of Washington  
County of Skagit Signed or attested before me on 5-26-06  
by Joel W. Sloth Signature A. McDowell  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT  
by Karen K. Sloth Signature A. McDowell  
PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY  
Title Agent AND: County/Office No. OR 201933  
DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date

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

Tract 114, "CEDARGROVE ON THE SKAGIT", as per plat recorded in Volume 9 of Plats, pages 48 through 51, inclusive, 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) COACH CORRAL, INC. WA DEALER NUMBER 4228 DATE OF SALE 4-10-06  
PURCHASE PRICE 59360 TAX JURISDICTION/TAX RATE 8.0% 29 DEALER'S AUTHORIZED SIGNATURE [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) K. Lowery COUNTY OFFICE/VFS OPERATOR NUMBER 290108  
SIGNATURE [Signature] DATE 5/26/06

**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 (800) 833-2600 or TDD (360) 664-8885.

