

RETURN ADDRESS



200606020143

Skagit County Auditor

6/2/2006 Page

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2 4:13PM

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

TYPE PLATE NUMBER <u>009683</u>	YEAR <u>73</u>	MAKE <u>Superdex II</u>	LENGTH/WIDTH (FEET) <u>10/68</u>	VEHICLE IDENTIFICATION NUMBER (VIN) <u>1068</u>
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2 LAND

LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
162511

LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)

ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER <u>29</u>	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER

ROBERT L SHEETS

NAME OF ADDITIONAL REGISTERED OWNER

AUDREY R. SHEETS

ADDRESS CITY STATE ZIP CODE

102 GARDNER RD. BURLINGTON WA. 98232

NAME OF LEGAL OWNER

ROBERT L SHEETS

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS CITY STATE ZIP CODE

102 GARDNER RD. BURLINGTON WA 98232

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

Robert L Sheets

Signature of Additional Registered Owner and Title, IF APPLICABLE

Audrey R. Sheets

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington
County of Skagit

Signed or attested before me on 6/2/06

by _____
PRINT NAME OF REGISTERED OWNER

Signature _____
NOTARY OR AGENT

by _____
PRINT NAME OF REGISTERED OWNER

PRINTED NAME OF NOTARY

Title _____
DEALERSHIP POSITION/AGENT/NOTARY

AND: 200108
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: 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) BLDG PERMIT OFFICE/PHONE #
Elaine Pitman Skagit County Planning

BLDG PERMIT #
5943

SIGNATURE / POSITION
Elaine Pitman, Permit Tech

DATE
6-2-06

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 Notary Expiration Date
Title _____ DEALERSHIP POSITION/AGENT/NOTARY	AND:	

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

Burlington Ac P+u S'2 W'2 Tr 36 AKA TR A
Sht pl+ 24-74 Ind 1973 Sierra Mbl
Lel/14 PC 33 H 1068

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	
<input type="checkbox"/> 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) <i>Kushy Lervey</i>	COUNTY OFFICE/VFS OPERATOR NUMBER <i>290108</i>
SIGNATURE <i>Kushy Lervey</i>	DATE <i>6/2/06</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 opportunity.
If you need special accommodations, please contact us.



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