



200607110052

Skagit County Auditor

RETURN ADDRESS

7/11/2006 Page

1 of

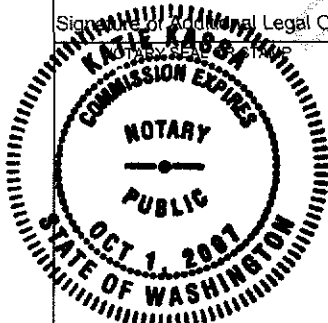
2 10:39AM

Peoples Bank

PO Box 233

Lynden, WA 98264

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 +370421	YEAR 2005	MAKE Golden West	LENGTH/WIDTH(FEET) 66 X 41	VEHICLE IDENTIFICATION NUMBER (VIN) ALB0292820R	
2 LAND LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 4777-000-008-0000 (P118033)			
LOT 8	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE River Valley View Estates		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS 2		NUMBER OF LEGAL OWNERS 1	
NAME OF REGISTERED OWNER Richard Allen Ammons		DOL CUSTOMER ACCOUNT NUMBER AMMONRA461RM			
NAME OF ADDITIONAL REGISTERED OWNER Christopher James Livingston		DOL CUSTOMER ACCOUNT NUMBER LIVINGCJ345ME			
ADDRESS 5826 Jennifer Lane		CITY Burlington		STATE ZIP CODE WA 98233	
NAME OF LEGAL OWNER Peoples Bank		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS PO Box 233		CITY Lynden		STATE ZIP CODE WA 98264	
GRANTEE					
NAME same as grantor					
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					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of SKAGIT		Signed or attested before me on January 12, 2006			
Richard Allen Ammons PRINT NAME OF REGISTERED OWNER		Signature			
Christopher James Livingston PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT			
Title Notary DEALERSHIP POSITION/AGENT/NOTARY		PRINTED NAME OF NOTARY KIMBERLY BOE			
		AND: County/Office No. OR Dealer No. OR Notary Expiration Date 02/07/09			
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) Georgine Rosson		BLDG PERMIT OFFICE/PHONE # Skagit County Planning 336-9410		BLDG PERMIT # BP05-0081	
SIGNATURE / POSITION 		Permit Technician		DATE 7/11/06	

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER +370421	YEAR 2005	MAKE Golden West	LENGTH/WIDTH(FEET) 66 X 41	VEHICLE IDENTIFICATION NUMBER (VIN) ALB0292820R	
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 <u>[Signature] Vice President</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of <u>SKAGIT</u>		before me on <u>12/9/05</u>	
		by <u>Dennis F. Roe, VP</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by _____		Katie Kassa		PRINTED NAME OF NOTARY	
PRINT NAME OF LEGAL OWNER		County/Office No. OR		AND: Dealer No. OR	
Title <u>Notary</u>		Notary		Notary Expiration Date <u>10/01/07</u>	
DEALERSHIP POSITION/AGENT (NOTARY)					
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 8, RIVER VALLEY VIEW ESTATES, according to the plat thereof, recorded on May 7, 2001, under Auditor's File No. 200105070102, records of Skagit County, Washington. Situated in Skagit County, 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) <u>The Housing Mart, Inc</u>		WA DEALER NUMBER <u>4588</u>		DATE OF SALE <u>2-15-05</u>	
PURCHASE PRICE <u>149,040.00</u>	TAX JURISDICTION/TAX RATE <u>7.8</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>			
<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) <u>Gabrielle Clay</u>			COUNTY OFFICE/MS OPERATOR NUMBER <u>2901127</u>		
SIGNATURE <u>[Signature]</u>			DATE <u>7-11-06</u>		
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 (360) 902-3600 or TTY (360) 664-8885.



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