

RETURN ADDRESS

Larry + Betty Sargent
3330 Granada Way
Bellingham, WA 98225



200607200089

Skagit County Auditor

7/20/2006 Page

1 of

211:43AM

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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER 83088	YEAR 88	MAKE FURNACE	LENGTH/WIDTH(FEET) X	VEHICLE IDENTIFICATION NUMBER (VIN) 10093	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 4012-000-023-000	
LOT 23	BLOCK	PLAT NAME Shant St. Head Trac		SECTION/TOWNSHIP/RANGE	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER Skagit 9994		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS 2	
NAME OF REGISTERED OWNER Betty Sargent					
NAME OF ADDITIONAL REGISTERED OWNER Larry Sargent					
ADDRESS 3330 Granada Way		CITY Bellingham		STATE WA ZIP CODE 98225	
NAME OF LEGAL OWNER Betty Sargent					
NAME OF ADDITIONAL LEGAL OWNER Larry Sargent					
ADDRESS 3330 Granada Way		CITY Bellingham		STATE WA ZIP CODE 98225	
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 Betty L Sargent					
Signature of Additional Registered Owner and Title, IF APPLICABLE Larry Sargent					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Skagit Signed or attested before me on 7/18/06 Signature of Ida Mae Ekkelkamp PRINTED NAME OF NOTARY Ida Mae Ekkelkamp County/Office No. OR Dealer No. OR 15/0/08 Notary Expiration Date			
by Betty Sargent PRINT NAME OF REGISTERED OWNER by Larry Sargent PRINT NAME OF REGISTERED OWNER Title J. J. J. J. 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) Ida Ekkelkamp		TITLE COMPANY / PHONE NUMBER Land Title Company 360-707-2312			
SIGNATURE / POSITION Ida Ekkelkamp		DATE 7/20/06			
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: <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) LORI ANDERSON		BLDG PERMIT OFFICE/PHONE # 360-336-9410		BLDG PERMIT # 5P00-1185	
SIGNATURE / POSITION Lori Anderson		Support Services Tech.		DATE 7/20/06	

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) SIGNATUREState of Washington
County of _____Signed or attested
before me on _____by
PRINT NAME OF LEGAL OWNER _____Signature _____
NOTARY OR AGENTby
PRINT NAME OF LEGAL OWNER _____

PRINTED NAME OF NOTARY _____

Title
DEALERSHIP POSITION/AGENT/NOTARY _____AND: County/Office No. OR
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)**

Tract 23, "The Plat of Skagit Steelhead Tracts", as
per plat recorded in Volume 8 of Plats, page 10, records
of 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) _____

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 _____

DATE _____

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 1-800-541-5800.



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