

## RETURN ADDRESS

Donna Beland/Land Title Company  
 2320 Cedar Court P.O. Box 445  
 Mount Vernon, Wa. 98278 Burlington, WA 98233  
 Escrow #118388-PE



200609010005  
 Skagit County Auditor

9/1/2006 Page 1 of 2 8:48AM

## LAND TITLE OF SKAGIT COUNTY

STATE OF WASHINGTON Department of		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
<b>Licensing</b>				<input checked="" type="checkbox"/>	TITLE ELIMINATION
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)				<input type="checkbox"/>	TRANSFER IN LOCATION
				<input type="checkbox"/>	REMOVAL FROM REAL PROPERTY
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2006	Palm Harbor	27 x 58	PH 20-8208	
<b>2 LAND</b>					
MANUFACTURED HOME WILL BE		AFFIXED	REMOVED	REAL PROPERTY TAX PARCEL NUMBER: 3899-000-005-0300, P122089	
		X			
Lot	Block	Plat Name or Section/Township/Range		Quarter/Quarter Section	
5		Dewey Beach Addition			
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE</b>					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Donna Beland					
NAME OF ADDITIONAL REGISTERED OWNER			DOL CUSTOMER ACCOUNT NUMBER		
Ronald Beland					
ADDRESS	CITY	STATE	ZIP CODE		
24733 Minkler Road, Sedro Woolley, WA	98284				
NAME OF LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
BSM Financial, LP					
NAME OF ADDITIONAL LEGAL OWNER			DOL CUSTOMER ACCOUNT NUMBER		
ADDRESS	CITY	STATE	ZIP CODE		
16479 Dallas Parkway #100	Addison	TX	75001		
<b>GRANTEE</b>					
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 <i>Donna Beland</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Ronald Beland by Donna Beland as attorney in fact</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington			
		Signed or attested before me on <i>12/2/05</i>			
		County of <u>Skagit</u>			
		Signature <i>Anneliese Maria Farrell</i>			
		NOTARY OR AGENT			
		Print Name of Registered Owner			
		Ronald Beland			
		Print Name of Registered Owner			
		Anneliese Maria Farrell			
		PRINTED NAME OF NOTARY			
		County/Office No. OR			
		AND: Dealer No. OR			
		Notary Expiration Date <u>6-28-08</u>			
		Title _____ Notary _____			
		DEALERSHIP POSITION/AGENT/NOTARY			
<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)			TITLE COMPANY/PHONE NUMBER		
Anneliese M. Farrell			Land Title Company (360) 707-2312		
SIGNATURE/POSITION			DATE		
<i>Anneliese Maria Farrell</i> Escrow Closer			3/15/06		
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 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)		BLDG PERMIT OFFICE/PHONE # (360) 336-4410		BLDG PERMIT # BP05-1367	
SIGNATURE/POSITION				DATE	
Lori Anderson Support Services Tech				6-2-06	
<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE/REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <u>Dana Reynolds, LP</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP  CHRISTINE BITTING Notary Public, State of Washington My Commission Expires July 16, 2008		<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>			
		State of Washington <u>Wash</u>		Signed or attested before me on <u>3/14/06</u>	
		County of <u>Skagit</u>		Signature <u>[Signature]</u>	
		by <u>Dana Reynolds</u>		Printed Name of Legal Owner	
		by <u>BSM Financial, L.P.</u>		Printed Name of Legal Owner	
		Title <u>Notary</u>		AND: Dealer No. OR Notary Expiration Date <u>2/14/08</u>	
DEALERSHIP POSITION/AGENT/NOTARY					
<b>7 LAND DESCRIPTION</b> (A legal description of the land can be obtained from the local County Assessor's)					
Lot 3 Short Plat #PL02-0691, approved 8/27/04, recorded 9/21/05 being a ptn of Lot 5 "Dieter's Acreage, Skagit Co., Wash." as per plat recorded in Volum 3 of Plats, pg 53, Skagit County, Wash. Situate in the County of Skagit, State of Washington.					
<b>8 DEALER'S REPORT OF SALE</b>					
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLES 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	
Palm Harbor Village		4511		2/14/06	
PURCHASE PRICE		TAX JURISDICTION/TAX RATE		DEALER'S AUTHORIZED SIGNATURE	
131,532.96		Skagit 7.9%		<u>[Signature]</u>	
<input type="checkbox"/> <b>USE TAX EXEMPT</b> Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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/VEHICLE OPERATOR NUMBER	
YOUNG VANG				2901/25	
SIGNATURE <u>[Signature]</u>				DATE 9-1-06	
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<b>IMPORTANT:</b> 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.					
<b>APPLICANTS:</b> 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.					



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9/1/2006 Page 2 of 2 8:48AM

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 TDD (360) 664-8885.