

RETURN ADDRESS  
Caryn Settle

45281 Ridgeway Court  
Concrete, WA 98237-9258



200610190081  
Skagit County Auditor

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CHICAGO TITLE CO. 1040250

**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 # 109141	YEAR 90	MAKE Oaxana	LENGTH/WIDTH(FEET) 56X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 009101442AB
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**2 LAND** LEGAL DESCRIPTION ON PAGE \_\_\_\_\_

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
4667-000-005-0000

LOT 5	BLOCK	PLAT NAME Cascade Heights	SECTION/TOWNSHIP/RANGE
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**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)** ADDITIONAL NAMES ON PAGE \_\_\_\_\_

COUNTY NUMBER P 108154	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER  
Caryn Settle

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS  
45281 Ridgeway Ct Concrete WA 98237

CITY STATE ZIP CODE

NAME OF LEGAL OWNER

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 *Caryn Settle*

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of *Skagit* Signed or attested before me on *9-8-06*

by *Caryn Settle* Signature *[Signature]* 290/27  
PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

by \_\_\_\_\_ PRINTED NAME OF NOTARY

Title \_\_\_\_\_ AND: *290/27*  
DEALERSHIP POSITION/AGENT/NOTARY County/Office No. OR Dealer No. OR 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) <i>Cassi Mitchell</i>	TITLE COMPANY / PHONE NUMBER Chicago Title Company/360-424-1700
SIGNATURE / POSITION <i>Cassi Mitchell LPO</i>	DATE <i>9-19-06</i>

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) <i>JA McCormick</i>	BLDG PERMIT OFFICE/PHONE # <i>360-833-8401</i>	BLDG PERMIT # <i>04-012</i>
SIGNATURE / POSITION <i>[Signature]</i>	DATE <i>10-6-06</i>	

**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 \_\_\_\_\_ Signed or attested  
County of \_\_\_\_\_ before me on \_\_\_\_\_

by \_\_\_\_\_ Signature \_\_\_\_\_  
PRINT NAME OF LEGAL OWNER NOTARY OR AGENT

by \_\_\_\_\_ PRINTED NAME OF NOTARY  
PRINT NAME OF LEGAL OWNER

Title \_\_\_\_\_ AND: County/Office No. OR  
Dealer No. OR  
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)**

Lot 5, CASCADE HEIGHTS, according to the plat thereof, recorded in Volume 16 of Plats, pages 85 and 86, 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) \_\_\_\_\_ 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) *Gabrielle Clay* COUNTY OFFICE/VFS OPERATOR NUMBER *2901-27*

SIGNATURE *Gabrielle Clay* DATE *10-19-06*

**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  
If you need special accomm



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