

RETURN ADDRESS

Land Title Company  
 P.O. Box 445  
 Burlington, WA 98233  
 Escrow #117847-SE



200610300202  
 Skagit County Auditor

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**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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	2006	PALMHALOSR	X	PH20-8033

**2 LAND**

LEGAL DESCRIPTION ON PAGE \_\_\_\_\_  
 MANUFACTURED HOME WILL BE  AFFIXED  REMOVED  
 REAL PROPERTY TAX PARCE NUMBER: P122088

LOT	BLOCK	PLAT NAME	SECTION	TOWNSHIP/RANGE
1		Dieters Acreage		

**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)**

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
	2	1

NAME OF REGISTERED OWNER: Joshua Arquitt

NAME OF ADDITIONAL REGISTERED OWNER: Sarah Arquitt

ADDRESS	CITY	STATE	ZIP CODE
24705 Minkler Road	Sedro Woolley	WA	98284

NAME OF LEGAL OWNER: BSM Financial LP

NAME OF ADDITIONAL LEGAL OWNER: \_\_\_\_\_

ADDRESS	CITY	STATE	ZIP CODE
16479 Dallas Parkway, Suite 100,	Addison	TX	75001

**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: *Joshua Arquitt*

Signature of Additional Registered Owner and Title, IF APPLICABLE: *Sarah Arquitt*

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**

State of Washington County of Skagit Signed or attested before me on 4-5-06

Joshua Arquitt Signature *Joshua Arquitt*  
 PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT

Sarah Arquitt Signature *Anneliese Maria Farrell*  
 PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title Notary AND: County/Office No. OR 6/28/08  
 DEALERSHIP POSITION/AGENT/NOTARY 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
Anneliese Farrell	Land Title Company (360)707-2312

SIGNATURE / POSITION: *Anneliese M. Farrell* Escrow Closer DATE: 4/5/06

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:  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 #	BLDG PERMIT #
Georgina Rossen	Skagit County Planning 336-9410	BP05-1018

SIGNATURE / POSITION: *Georgina Rossen* Permit Technician DATE: 10/5/06

**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

*[Handwritten Signature]* Vice President

Signature of Additional Legal Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP



**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**

State of ~~Washington~~ Texas  
County of Collin

Signed or attested before me on 4/18/04

by James E. Smith  
PRINT NAME OF LEGAL OWNER

Signature *[Handwritten Signature]*  
NOTARY OR AGENT

by BSM Financial, L.P.  
PRINT NAME OF LEGAL OWNER

**Christine Bitting**  
PRINTED NAME OF NOTARY

Title Agent  
DEALERSHIP POSITION/AGENT/NOTARY

AND: County/Office No. OR Dealer No. OR Notary Expiration Date 7/16/08

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

Lot 1, Short Plat No. PL02-0691, approved August 27th, 2004, recorded September 21, 2004, being a portion of Lot 5, "DIETER'S ACREAGE, SKAGIT CO., WASH.", as per plat recorded in Volume 3 of Plats, Page 53, 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) Palm Harbor Village WA DEALER NUMBER 4511 DATE OF SALE 10/18/05

PURCHASE PRICE 127,363.72 TAX JURISDICTION/TAX RATE Skagit 7.9% DEALER'S AUTHORIZED SIGNATURE *[Handwritten 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/FS OPERATOR NUMBER 2901/27

SIGNATURE *[Handwritten Signature]* DATE 10-30-06

**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 has a policy of If you need special accommodation, please



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