

RETURN ADDRESS

FIRST AMERICAN TITLE

160 Cascade Place

Suite 104

Burlington, WA 98233

B80077

200611030077
Skagit County Auditor

11/3/2006 Page

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2 11:25AM

		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)	
	1994	Lexin	48X28	2T9111716AB	
2 LAND					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED			REAL PROPERTY TAX PARCEL NUMBER P105661		
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
4		Plat of Garden Terrace			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		2		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
mark white					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Cindi white					
ADDRESS		CITY	STATE	ZIP CODE	
8951 Garden Terrace		Sedro Woolley	WA	98284	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Argent Mortgage Company					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
2603 Main Street		IRVINE	CA	92614	
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				mark white	
Signature of Additional Registered Owner and Title, IF APPLICABLE				Cindi white	
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington County of Skagit		Signed or attested before me on 10/14/04			
by mark white		Signature Kim M. Kerr			
PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT			
by Cindi white		Kim M. Kerr			
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY			
Title Coker		AND: County/Office No. OR Dealer No. OR 12/15/05			
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			
Richard L. Cole					
SIGNATURE / POSITION		DATE			
[Signature]		10-27-06			
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 #		BLOG PERMIT #	
Georgine Rossen		Skagit County Planning 336-9410		94-0147	
SIGNATURE / POSITION		DATE			
[Signature] Permit Technician		9/11/06			

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.

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.

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.

10 TITLE FEES		FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES	TOTAL FEES & TAX
SIGNATURE <i>Gabrielle Clay</i>		DATE 11-3-06						
NAME (TYPED OR PRINTED) <i>Gabrielle Clay</i>		COUNTY OFFICE/VEHICLE OPERATOR NUMBER 2901-27						
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.								
9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)								
[] USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery)								
PURCHASE PRICE		TAX JURISDICTION/TAX RATE		DEALER'S AUTHORIZED SIGNATURE				
DEALER NAME (TYPED OR PRINTED)		DEALER NUMBER		DATE OF SALE				
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.								
Lot 4, "PLAT OF GARDEN TERRACE", as per plat recorded in Volume 15 of Plats, pages 153 through 154, records of Skagit County, Washington.								
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office.)								
NOTARY SEAL OR STAMP 		Signature of Legal Owner and Title, IF APPLICABLE Signature of Additional Legal Owner and Title, IF APPLICABLE Signature of Legal Owner INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.						
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE		State of Washington County of Skagit Signed or attested before me on 10/24/06						
Signature of Agent		PRINTED NAME OF LEGAL OWNER <i>Roger H. Vasquez</i>						
Signature of Agent		PRINTED NAME OF NOTARY <i>Roger H. Vasquez</i>						
Signature of Agent		Title by PRINTED NAME OF LEGAL OWNER by PRINTED NAME OF LEGAL OWNER AND: County/Office No. OR Dealer No. OR Notary Expiration Date						