

RETURN ADDRESS

CHICAGO TITLE COMPANY

P. O. BOX 670

BURLINGTON WA 98233

CHICAGO TITLE COMPANY IC38341

200611090067
Skagit County Auditor

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		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE <input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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)	
	2007	Fleetwood	52 X 27	ORFL64831415	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED			REAL PROPERTY TAX PARCEL NUMBER 350715-1-003-0000 P42704		
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
3		SKAGIT CO. SHORT PLAT #PL02-0718	15/35/7		
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		2		1	
NAME OF REGISTERED OWNER					
BILLI J. GRYPHON					
NAME OF ADDITIONAL REGISTERED OWNER					
JED S. VARNEY					
ADDRESS		CITY	STATE	ZIP CODE	
8179 Emmanuel Lane		Concrete	WA	98237	
NAME OF LEGAL OWNER					
GOLF SAVINGS BANK					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
6505 218th St. S.W., Suite 9		Mountlake Terrace	WA	98043	
GRANTEE					
NAME					
GOLF SAVINGS BANK					
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					
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 8-25-06	
		by BILLI J. GRYPHON PRINT NAME OF REGISTERED OWNER		Signature	
		by JED S. VARNEY PRINT NAME OF REGISTERED OWNER		LINDA L. GEISER PRINTED NAME OF NOTARY	
		Title		AND: County/Office No. OR Dealer No. OR 8-20-07 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		
SIGNATURE / POSITION			DATE		
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)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
LORI ANDERSON SKAGIT COUNTY PLANNING		360-330-9410		BP06-0536	
SIGNATURE / POSITION				DATE	
		SUPPORT SERVICES TECH.		11/8/06	

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) SIGNATURE

ROBYN L. MIXER
NOTARY PUBLIC
STATE OF WASHINGTON
COMMISSION EXPIRES
MAY 3, 2007

State of Washington
County of

Snohomish

Signed or attested
before me on

10/23/06

David S Pearson, Sr. V.P.

Signature

Robyn Mixer

PRINT NAME OF LEGAL OWNER

Gulf Savings Bank

PRINT NAME OF LEGAL OWNER

Title Notary

AND:

County/Office No. OR

Dealer No. OR

Notary Expiration Date

5/9/07

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

Lot 3 of SKAGIT COUNTY SHORT PLAT NO. PL02-0718, as approved August 9, 2004, and recorded August 27, 2004, under Auditor's File No. 200408270144, records of Skagit County, Washington; being a portion of the Northwest Quarter of the Northeast Quarter of Section 15, Township 35 North, Range 7 East of the Willamette Meridian.

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)

Coach Corral

WA DEALER NUMBER

4278

DATE OF SALE

8-30-06

PURCHASE PRICE

26,923

TAX JURISDICTION/TAX RATE

8.0%

DEALER'S AUTHORIZED SIGNATURE

Ray P. Dehner

☐ 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)

Kristy Lurvey

COUNTY OFFICE/VFS OPERATOR NUMBER

290108

SIGNATURE

Kristy Lurvey

DATE

11/9/06

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 providing equal access to its services. If you need special accommodation, please call (800) 822-8888.



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