

RETURN ADDRESS



200612070084

Skagit County Auditor

12/7/2006 Page

1 of

2 12:27PM

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
<p>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)</p>				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
1299994	1984	FLTWD	26 X 66	ORLS2AE01482684	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 4101-068-011- P730177					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
8-11	68	Fidalgo City			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
NAME OF REGISTERED OWNER					
Odetta Marie Sturdefant					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL REGISTERED OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS					
6244 SR 20 Anacortes WA 98221					
CITY					
STATE					
ZIP CODE					
NAME OF LEGAL OWNER					
Odetta Marie Sturdefant					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL LEGAL OWNER					
SAME AS ABOVE					
DOL CUSTOMER ACCOUNT NUMBER					
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					
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 12-7-06 by Odetta M. Sturdefant PRINT NAME OF REGISTERED OWNER Signature [Signature] NOTARY OR AGENT by [Signature] PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY Title [Signature] DEALERSHIP POSITION/AGENT/NOTARY AND: County/Office No. OR Dealer No. OR Notary Expiration Date 2901/25			
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 type="checkbox"/> the manufactured home has been affixed to the real property as described. <input checked="" 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 #					
DATE					
ALAN JONGSMA 360-336-9410 BPO4-0830 SIGNATURE/POSITION ASST. BUILDING OFFICIAL 12-7-06					

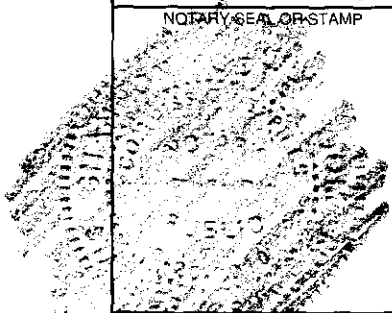
MANUFACTURED HOME - FROM SECTION 1

TPO/PLATE NUMBER 1299994	YEAR 1984	MAKE FLTD	LENGTH/WIDTH(FEET) 26X66	VEHICLE IDENTIFICATION NUMBER (VIN) ORLS2AE01482684
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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 Odetta Studefant
 Signature of Additional Legal Owner and Title, IF APPLICABLE _____

	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
	State of Washington County of <u>Skagit</u>	Signed or attested before me on <u>12/7/06</u>
	by <u>Odetta Studefant</u> PRINT NAME OF LEGAL OWNER	Signature <u>Shannon Nootenboom</u> NOTARY OR AGENT
	by _____ PRINT NAME OF LEGAL OWNER	PRINTED NAME OF NOTARY <u>Shannon Nootenboom</u>
Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR <u>08/20/2010</u> Notary Expiration Date

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

P73077
Including manufactured home
Number 1482684; Fidalgo City, Lots 8 to 11, BIK 68

8 DEALER'S REPORT OF SALE

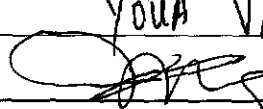
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

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) <u>YOUNG VAN G</u>	COUNTY OFFICE/VFS OPERATOR NUMBER <u>2901/25</u>
SIGNATURE 	DATE <u>12-7-06</u>

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

