

RETURN ADDRESS

FIRST AMERICAN TITLE
3202 COMMERCIAL AVE
ANACORTES, WA 98221



200612110182
Skagit County Auditor

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A89959

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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)		☒ TITLE ELIMINATION		☐ TRANSFER IN LOCATION	
		☐ REMOVAL FROM REAL PROPERTY			
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2006	Palm Harbor	27 X 66	PH208142	
2 LAND					
LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 3999-000-015-0000/P69146					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
15		Shore Acres to Guemes Island			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER					
Ian L. Campbell					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL REGISTERED OWNER					
Kimberly K. Campbell					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS					
7073 Upland Drive,					
CITY					
Anacortes					
STATE					
WA					
ZIP CODE					
98221					
NAME OF LEGAL OWNER					
Horizon Bank					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL LEGAL OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS					
1500 Cornwall, P. O. Box 580, Bellingham,					
CITY					
WA					
STATE					
ZIP CODE					
98227-0580					
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		Signed or attested before me on			
County of Skagit		JULY 7, 2006			
Ian L. Campbell		Signature			
PRINT NAME OF REGISTERED OWNER		TAMARA A SATKO			
Kimberly K. Campbell		NOTARY OR AGENT			
PRINT NAME OF REGISTERED OWNER		TAMARA A SATKO			
Title		PRINTED NAME OF NOTARY			
Notary		County/Office No. OR			
DEALERSHIP POSITION/AGENT/NOTARY		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)					
TAMARA SATKO					
TITLE COMPANY / PHONE NUMBER					
First American Title Company 360-293-5423					
SIGNATURE / POSITION					
TAMARA A SATKO					
DATE					
7/7/07					
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)					
LORI ANDERSON					
BLDG PERMIT OFFICE/PHONE #					
SKAGIT COUNTY PLANNING 360 336 9410					
BLDG PERMIT #					
BP06-0553					
SIGNATURE / POSITION					
Lori Anderson					
Support Services Tech					
DATE					
12/11/06					

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TD-420-729 MANUF HOME APPL (R/2/00)OR (W/PAGE 2 of 2

The Department of Licensing has a policy of providing equal access to its services. If you need special accommodation, please call (800) 833-8885 or TTY (360) 664-8885.

6 SIGNATURE OF LEGAL OWNER	
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.	
BY: Eileen Hebert, Mortgage Loan Officer	
Signature of Legal Owner and Title, IF APPLICABLE	
Signature of Additional Legal Owner and Title, IF APPLICABLE	
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE	
State of Washington County of Skagit Signed or attested before me on 11/30/06 Signature of Notary Public TAMARA A. SATKO PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR AND: Notary Expiration Date 11/7/07 Title: Notary DEALERSHIP POSITION/AGENT/NOTARY	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)	
Lot 15, "SHORE ACRES ADDITION TO GUEMES ISLAND", as per plat recorded in Volume 7 of Plats, Pages 90 and 91, 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 7/13/06
TAX JURISDICTION/TAX RATE 8%	DEALER'S AUTHORIZED SIGNATURE General Manager
PURCHASE PRICE \$3,445	
I 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/REGISTRATION NUMBER 2901027
SIGNATURE Gabrielle Clay	DATE 12.11.06
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.	