

RETURN ADDRESS George matternon WA 98273

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2/21/2007	Page	1 of	2	9:49AM

90408	
Manufactured Home Application 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,	PLEASE CHECK ONE ATITLE ELIMINATION TRANSFER IN LOCATION REMOVAL FROM REAL PROPERTY or both. (RCW 46.12.210)
MANUFACTURED HOME	
1PO/PLATE NUMBER YEAR MAKE LENGTH/WIDTH/FEET) VEHICLE 28 X 48	IDENTIFICATION NUMBER (VIN) 91.26998 X U RIPTION ON PAGE
MANUFACTURED HOME WILL BE AFFIXED REMOVED	PROPERTY TAX PARCEL NUMBER
LOT BLOCK PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
	NAMES ON PAGE
COUNTY NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
ADDRESS 13357 JOSH WILSON ROW MAYE NAME DELEGAL OWNER	MON WH 98273 DOLCUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
ADDRESS CITY	STATE ZIP CODE
GRANTEE	
NAME	
Signature of Additional Registered Owner and Title, IF APPLICABLE NOTARY PUBLIC NOTARY PUBLIC PUBLIC NOTARY PUBLIC PUBLIC NOTARY PUBLIC PUBLIC NOTARY PUBLIC PUBL	REGISTERED OWNER(S) SIGNATURE Signed or attested before) me on 2124 07
by PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY County/Office No. OR AND: 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	r the real property records.
NAME (TYPED OR PRINTED) TITLE COMPAN	Y/PHONE NUMBER
SIGNATURE / POSITION	DATE
Finalize this application with a Licensing Agent within 10 calendar days of the	e date Title Company Representative signs.
5 BUILDING PERMIT OFFICE CERTIFICATION I certify that:	erty as described.
NAME (TYPED OR PRINTED) BLDG PERMIT OFFICE/PHONE # 346	0-336 BLDG PERMIT#
Lori Anderson Skagit County Planning Support Service TO ADDROUGH STREET SERVICE TO ADDROUGH STREET SERVICE TO ADDROUGH SERVICE	g 9410 26869. ec Tech 2/20/07

TPQ / PLATE NUM	RED HOME - F	ROM SECTION 1			
	BER YEAR	MAKE	LENGTHAVIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER	
12065			28 X 48	09126998	<u> </u>
6 SIGNATU	RE OF LEGAL O	OWNER			
SIGNATURE (F LEGAL OWN	ER INDICATES CONS	ENT FOR ELIMINATION	ON OF TITLE / REMOVAL FRO	OM REAL PROPERTY.
Sign	ature of Legal C	owner and Title, IF APF	LICABLE		
Signature of A	dditional Legal C	wner and Title, IF APF	LICABLE		
	AL OR STAMP	NOTAR	ZATION/CERTIFICA	TION FOR LEGAL OWNER(S) SIGNATURE
l		State of Washingto	n	Signed or atteste	ed
Ì		County o		before me	on
}			À		
ļ		PRINT NAME OF LE	GAL OWNER	Signature NOTARY OR	AGENT
1		PHINT NAME OF CE	GALOWNER	110 17 1111 011	
]		by PRINT NAME OF LE	GAL OWNER	PRINTED NAME OF NOTA	JRY
		Same of the same o	Anc Officer	County/C	Office No. OR
}		Title	TION/AGENT/NOTARY		ealer No. OR
AND DE	COURTION (A			ined from the local County	Assessor's Office)
LAND DE	CHIPTION (A	regar description of		1) 0) 00	Occupied Arional
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24 198	8 and	recordad:	August 20	e,1988, in Volu	ince 8 of
Shart	Plats. 1	page 60,	under Au	No. 31-88, ap 0,1988, in Volu edutor's File N	0.8808260303
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DF- 44	South	west 14 c	of the Son	utheast 14 of 4	the South West
V	Secho	~ 29. TOW	nshio 35 M	John, Range	3 East, W.M.
14 04	Se cal (O)	,, -,, -, -,	The second second	A Company of the Comp	
OF DEALER	S REPORT OF	SALE			
I CERTIFY	THAT THIS INF	ORMATION IS CORR AX HAS BEEN COLL	ECT. THE VEHICLE	IS CLEAR OF ENCUMBRANC	CES EXCEPT AS SHOWN.
	YPED OR PRINTED			WA DEALER NUMBER	DATE OF SALE
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PURCHASE PRIC			DEALER'S AUTHORIZE	DISIGNATURE	
)	E TAX	X JURISDICTION/TAX RATE	DEALERS AOTHONIZE		
					d statement of delivery).
USE	TAX EXEMPT	Sale to a Certified T	ribal member on the	reservation (attach notarize	d statement of delivery).
USE 9 COUNTY	TAX EXEMPT	Sale to a Certified T	ribal member on the	reservation (attach notarize ot for use by Subagents)	
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The Department of Licensing has a policy of providing equal access to its services.

If you need special accome: