

RETURN ADDRESS

Corey & Deanna Wohlman  
 23117 State Route 534  
 Mount Vernon, WA 98274



200704250100  
 Skagit County Auditor

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**STATE OF WASHINGTON**  
 Department of  
**Licensing**

**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 R073571	YEAR 1996	MAKE LEXIN	LENGTH/WIDTH (FEET) 28X52	VEHICLE IDENTIFICATION NUMBER (VIN) 2T91 1074 I AB
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**2 LAND**

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
330425-2-003-0308 (P17315)

LOT 2	BLOCK -	PLAT NAME 95-014	SECTION/TOWNSHIP/RANGE 25 33 04
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**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)**

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER  
COREY B. WOHLMAN

NAME OF ADDITIONAL REGISTERED OWNER  
DEANNA L. WOHLMAN

ADDRESS  
23117 State Route 534

CITY  
Mount Vernon

STATE  
WA

ZIP CODE  
98274

NAME OF LEGAL OWNER

NAME OF ADDITIONAL LEGAL OWNER

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 *Corey Wohlman*

Signature of Additional Registered Owner and Title, IF APPLICABLE *Deanna Wohlman*

**NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE**

NOTARY SEAL OR STAMP

State of Washington  
 County of Skagit

Signed or attested before me on 2/9/07

by Corey B. Wohlman  
 PRINT NAME OF REGISTERED OWNER

by Deanna L. Wohlman  
 PRINT NAME OF REGISTERED OWNER

Title Notary  
 DEALERSHIP POSITION/AGENT/NOTARY

Signature *Anneliese Maria Farrell*  
 NOTARY OR AGENT

PRINTED NAME OF NOTARY  
 Anneliese Maria Farrell

AND: County/Office No. OR Dealer No. OR Notary Expiration Date  
 6/28/08

**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)  
Anneliese Maria Farrell

TITLE COMPANY / PHONE NUMBER  
Land Title 360-707-2312

SIGNATURE / POSITION  
*Anneliese Maria Farrell* LPO/Escrow Officer

DATE  
2/9/07

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)

BLDG PERMIT OFFICE/PHONE #

BLOG PERMIT #

SIGNATURE / POSITION

DATE

**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

*Cory B. Wohlman*

Signature of Additional Legal Owner and Title, IF APPLICABLE

*Wendy L Wohlman*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE.

State of Washington  
County of \_\_\_\_\_

Signed or attested  
before me on \_\_\_\_\_

by \_\_\_\_\_  
PRINT NAME OF LEGAL OWNER

Signature \_\_\_\_\_  
NOTARY OR AGENT

by \_\_\_\_\_  
PRINT NAME OF LEGAL OWNER

PRINTED NAME OF NOTARY  
County/Office No. OR  
Dealer No. OR  
Notary Expiration Date

Title \_\_\_\_\_  
DEALERSHIP POSITION/AGENT/NOTARY

AND: \_\_\_\_\_

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

Lot 2 of Short Plat No. 95-014, approved March 25, 1996, recorded April 10 1996 in Book 12 of Short Plats, page 90, under Auditor's File No.9604100068 records of Skagit County, Washington, and being a portion of the SW 1/4 of the NW 1/4 Section 25, Township 33 North, Range 4 East W.M.

Situate in the County of Skagit, State of 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)

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)

*YOUA VANG*

COUNTY OFFICE/VFS OPERATOR NUMBER

*2901/25*

SIGNATURE

*[Signature]*

DATE

*4-25-07*

**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  
If you need special accommodation,



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Skagit County Auditor