



200706060147
Skagit County Auditor

RETURN ADDRESS

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Golf Escrow Corp.
6100 219th St, SW #440
MLT, WA 98043

#20070025

LAND TITLE OF SKAGIT COUNTY

124277-SW

WASHINGTON STATE 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)				<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)	
	2007	FLTWD	64 X 98	ORFL74831666-AE13	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 4619-000-005-0004	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
5		Elk Run Estates (formerly Max Sutton Est.)			
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				DOL CUSTOMER ACCOUNT NUMBER	
John L. Milholland Jr.					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Cynthia S. Milholland					
ADDRESS		CITY		STATE	ZIP CODE
610 Shiloh Lane		Sedro Woolley		WA	98284
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Golf Savings Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE	ZIP CODE
P.O. Box 5010		Lynnwood		WA	98046
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 <i>John L. Milholland Jr.</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Cynthia S. Milholland</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of Skagit		before me on 4-30-07	
		by John L. Milholland Jr. and Cynthia S. Milholland		Signature <i>Cindy Freydenlund</i>	
		by John L. Milholland Jr.		PRINTED NAME OF NOTARY Cindy Freydenlund	
		Title Notary		AND: County/Office No. OR Dealer No. OR 2-15-10 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 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 #	
D.L. Sutton		(360) 826-3027		0043	
SIGNATURE / POSITION		BLDG OFFICIAL		DATE	
<i>D.L. Sutton</i>				5-31-07	

MANUFACTURED HOME - FROM SECTION 1

TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
	2007	FLTWD	64 X 28	DRFL74831666-AE13

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]* S. VP
 Signature of Additional Legal Owner and Title, IF APPLICABLE: *[Signature]* Golf Savings Bank

NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE

State of Washington *Snohomish* County of *Snohomish* Signed or attested before me on *5/17/07*

by *David S. Pearson, S. VP* Signature *[Signature]*
 PRINT NAME OF LEGAL OWNER
Golf Savings Bank SHANNON L. OCHOA
 PRINT NAME OF LEGAL OWNER PRINTED NAME OF NOTARY
 Title *Notary* AND: County/Office No. OR
 DEALERSHIP POSITION/AGENT/NOTARY Dealer No. OR
 Notary Expiration Date *6/29/10*

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

See Legal Description attached.

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
<i>Coach Corral Inc.</i>	<i>4278</i>	<i>5/17/07</i>
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE
<i>103,490</i>	<i>8.0</i>	<i>[Signature]</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)	COUNTY OFFICE/VFS OPERATOR NUMBER
<i>Husby Lewery</i>	<i>290108</i>
SIGNATURE	DATE
<i>Husby Lewery</i>	<i>6/16/07</i>

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 (360) 902-3600 or TTY (360) 664-8885.



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MANUFACTURED HOME APPLICATION ADDITIONAL ATTACHMENT

Legal Description of Land

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- Title Elimination
- Removal From Real Property
- Transfer In Location

LAND:

PROPERTY TAX PARCEL NUMBER:

4619-000-005-0004

LEGAL DESCRIPTION:

Lot 5, "ELK RUN ESTATES," (formerly known as Max Sutton Estates) as per plat recorded in Volume 15 of Plats, page 173, under Auditor's File No. 9405200050; being an Amendment to the Plat of "MAX SUTTON ESTATES," as per plat recorded in Volume 15 of Plats, pages 161 and 162, under Auditor's File No. 9403110077, which was recorded as an Amendment of the Plat of "MAX SUTTON ESTATES," as per plat recorded in Volume 15 of Plats, pages 127 and 128, under Auditor's File No. 9401070082, records of Skagit County, Washington.

Situate in the County of Skagit, State of Washington.



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