



200707090115
Skagit County Auditor

7/9/2007 Page 1 of 2 2:11:28AM

RETURN ADDRESS

First American Title

160 Cascade Place, Suite 104

Burlington, WA 98233

Escrow No. B91537

WASHINGTON STATE DEPARTMENT OF LICENSING		Manufactured Home Application		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
@53480	1968	Nashu	55 X 12	UYB2TCK13656WN	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER 4138-012-012-0008					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
11 & 12	12	Clear Lake			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
P74848	1		1		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Kraut Houck					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
P.O. Box 771		Conway	WA	98238	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Summit Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
PO Box 805		Burlington	WA	98233	
GRANTEE					
NAME					
Kraut Houck					
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>Kraut</i>					
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	
		County of <i>Skagit</i>		before me on <i>5-14-07</i>	
		by <i>Kraut Houck</i>		Signature <i>Shirley Rose Lanum</i>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by _____		PRINTED NAME OF NOTARY	
PRINT NAME OF REGISTERED OWNER		COUNTY/OFFICE NO. OR		DEALER NO. OR	
Title <i>NOTARY</i>		AND: <i>10/19/08</i>		Notary Expiration Date	
DEALERSHIP POSITION/AGENT/NOTARY					
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		
Sandee Olson			First American Title of Skagit (
SIGNATURE / POSITION			DATE		
<i>[Signature]</i>			07/06/2007		
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 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 #		
LORI ANDERSON			360-396-7410		
SIGNATURE / POSITION			BLDG PERMIT #		
<i>[Signature]</i>			98-0701		
			DATE		
Support Services Tech			7/5/07		

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER @53480	YEAR 1968	MAKE Nashu	LENGTH/WIDTH(FEET) 55 X 12	VEHICLE IDENTIFICATION NUMBER (VIN) UYB2TCK13656WN	
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 of Additional Legal Owner and Title, IF APPLICABLE _____					
<div style="border: 1px solid black; border-radius: 50%; width: 100px; height: 100px; display: flex; align-items: center; justify-content: center; margin: 0 auto;"> <div style="text-align: center;"> <p>DEBI L. HOOPER</p> <p>COMMISSION EXPIRES</p> <p>NOTARY</p> <p>PUBLIC</p> <p>4-14-2010</p> <p>STATE OF WASHINGTON</p> </div> </div>		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington _____ County of <u>Skagit</u> Signed or attested before me on <u>5-16-07</u> by <u>Joshua Top</u> Signature <u>Debi L. Hooper</u> <small>PRINT NAME OF LEGAL OWNER NOTARY OR AGENT</small> by _____ <small>PRINT NAME OF LEGAL OWNER</small> Title <u>NOTARY PUBLIC</u> AND: <u>Debi L. Hooper</u> <small>DEALERSHIP POSITION/AGENT/NOTARY</small> <small>County/Office No. OR Dealer No. OR</small> <u>4-14-2010</u> <small>Notary Expiration Date</small>			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
The South 15 feet of Lot 11 and all of Lot 12, Block 12, "Plat of Clear Lake, Skagit County, Washington", as per plat recorded in Volume 4 of Plats, page 22 and 23, records of Skagit County, Washington; TOGETHER WITH the West 1/2 of vacated alley adjoining.					
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			
<input type="checkbox"/> 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>Missy Lawrence</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>290108</u>		
SIGNATURE <u>Missy Lawrence</u>			DATE <u>7/9/07</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.					
<div style="border: 1px solid black; padding: 5px;"> 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. </div>					
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 ac _____ 800-822-6888 or TTY (266) 664-8885.



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