



200710240122

Skagit County Auditor

10/24/2007 Page

1 of

2 4:23PM

RETURN ADDRESS

WASHINGTON FEDERAL SAVINGS

Mount Vernon Office

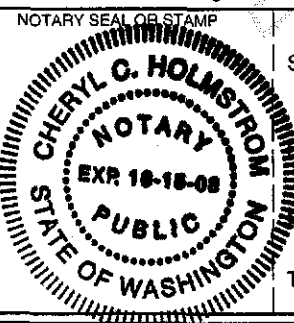
P.O. Box 639

Mount Vernon, WA 98273

325738-3 Land Title #124474

LAND TITLE OF SKAGIT COUNTY

STATE OF WASHINGTON 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)	
NEW	2007	Skyline	72 X 28	2091-0275-U AB	
2 LAND					
LEGAL DESCRIPTION ON PAGE 2					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER P122557	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
2		Short Plat PL-04-0269		15-35N-17E WM	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
029		1		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ERIC M STRINGFIELD					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE	ZIP CODE
8309 EMMANUEL LANE		CONCRETE		WA	98237
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
WASHINGTON FEDERAL SAVINGS					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE	ZIP CODE
1501 Riverside Dr.		Mount Vernon,		WA	98273
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					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY SEAL OR STAMP		State of Washington County of: Skagit			
		Signed or attested before me on 3-8-07			
		by ERIC M STRINGFIELD PRINT NAME OF REGISTERED OWNER		Signature	
		by -- PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		Title Notary DEALERSHIP POSITION/AGENT/NOTARY		PRINTED NAME OF NOTARY Allen L. Collins	
				AND: County/Office No. OR Dealer No. OR Notary Expiration Date 05-15-2007	
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 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 # 360-336-9410		BLDG PERMIT #	
LORI ANDERSON		SKAGIT COUNTY PLANNING		EPOT-0289	
SIGNATURE / POSITION		PERMIT TECHNICIAN		DATE	
				10/19/07	

MANUFACTURED HOME - FROM SECTION 1				
TPO/PLATE NUMBER NEW	YEAR 2007	MAKE Skyline	LENGTH/WIDTH(FEET) 72 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 2091-0275-U AB
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 <u>Allen L Collins</u> Vice-Pres.				
Signature of Additional Legal Owner and Title, IF APPLICABLE _____				
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington County of <u>Skagit</u> Signed or attested before me on <u>10-12-07</u> <u>WASHINGTON FEDERAL SAVINGS</u> Signature <u>Cheryl C Holmstrom</u> <small>PRINT NAME OF LEGAL OWNER</small> <small>NOTARY OR AGENT</small> Title <u>Notary</u> <small>PRINTED NAME OF NOTARY</small> <u>CHERYL C HOLMSTROM</u> <small>DEALERSHIP POSITION/AGENT/NOTARY</small> AND: County/Office No. OR Dealer No. OR <u>10-15-2008</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)				
Lot 2, Short Plat No. PL-04-0269, approved March 14, 2005, and recorded March 15, 2005 under Skagit County Auditor's File No. 200503150072; being a portion of the Southwest 1/4 of the Northeast 1/4 of Section 15, Township 35 North, Range 7 East, W.M. TOGETHER WITH a non-exclusive easement for ingress, egress and utilities as shown on the face of Short Plat No. 93-071, approved October 21, 1994, and recorded November 3, 1994, in Volume 11 of Short Plats, page 135, under Auditor's File No. 9411030038, and as set forth in Declaration recorded November 3, 1994, under Auditor's File No. 9411030039. 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) <u>Coach Carval Inc.</u>		WA DEALER NUMBER <u>4278</u>	DATE OF SALE <u>9/18/07</u>	
PURCHASE PRICE <u>82,995</u>	TAX JURISDICTION/TAX RATE <u>.080</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</u>		
<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>Kristy Lowrey</u>		COUNTY OFFICE/VFS OPERATOR NUMBER <u>2910108</u>		
SIGNATURE <u>Kristy Lowrey</u>		DATE <u>10/24/07</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.				
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) 684-9999.



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Skagit County Auditor