



200710300128

Skagit County Auditor

RETURN ADDRESS

10/30/2007 Page

1 of

2 3:55PM

Timothy Nelsen

24786 Chase Road

Sedro Woolley, Wa. 98284

Escrow #126057-SE

LAND TITLE OF SKAGIT COUNTY

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					
TPG / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2007	Skyline	56 X 27	2F91-0145-W AB	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER P107186	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
1		Replat Lot 4, Chase Acr.			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		1		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
NELSEN, TIMOTHY A.					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
24786 Chase Road		Sedro Woolley	WA	98284	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
HORIZON BANK					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
1500 Cornwall Ave.		Bellingham	WA	98225	
GRANTEE					
NAME same as grantor above					
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 _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of Skagit		before me on 10-13-07	
		by Timothy A. Nelsen		Signature	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by _____		PRINTED NAME OF NOTARY	
PRINT NAME OF REGISTERED OWNER		County/Office No. OR		AND: Dealer No. OR	
Title Notary		Notary Expiration Date 11/02/10			
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		
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 # 360-386-9410		BLDG PERMIT #	
LORI ANDERSON		SKAGIT COUNTY PLANNING		BP07-0489	
SIGNATURE / POSITION		DATE			
		PERMIT TECHNICIAN		10-30-07	

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2007	Skyline	56 X 27	2F91-0145-W 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>Reah Deuell Loan Close</u>					
Signature of Personal Legal Owner and Title, IF APPLICABLE _____					
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE					
State of Washington			Signed or attested		
County of <u>Whatcom</u>			before me on <u>06-15-07</u>		
by <u>Reah Deuell Loan Close</u>			Signature <u>Natalie Witney</u>		
PRINT NAME OF LEGAL OWNER, TITLE			NOTARY OR AGENT		
by _____			<u>Natalie Witney</u>		
PRINT NAME OF LEGAL OWNER			PRINTED NAME OF NOTARY		
Title <u>Notary Public</u>			County/Office No. OR		
DEALERSHIP POSITION/AGENT/NOTARY			AND: Dealer No. OR		
			Notary Expiration Date <u>06-15-09</u>		
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
<p>Lot 1 "REPLAT OF LOT 4 OF CHASE ACREAGE", as per plat recorded in Volume 16 of Plats, pages 45 and 46, records of Skagit County, Washington.</p> <p>Situate int he County of Skagit, State of Washington.</p>					
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
<u>Coach Corvel Inc.</u>			<u>4218</u>		<u>10/2/2007</u>
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE			
<u>58,400</u>		<u>Mary K. Blay</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)			COUNTY OFFICE/VFS OPERATOR NUMBER		
<u>Gabrielle Gray</u>			<u>2901-27</u>		
SIGNATURE			DATE		
<u>Gabrielle Gray</u>			<u>2901-27</u>		<u>10-30-07</u>
10 TITLE FEES					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<p>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.</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>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.</p> </div> <p>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.</p>					

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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