



200712130071

Skagit County Auditor

12/13/2007 Page

1 of

2 1:52PM

RETURN ADDRESS

Washington Federal Savings

PO Box 527

Burlington, Wa 98233

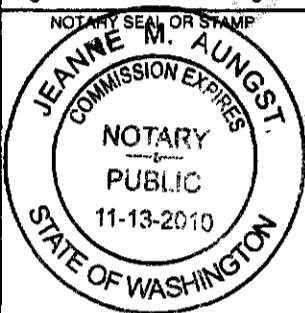
STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
				<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> REMOVAL FROM REAL PROPERTY	
Anyone who knowingly makes a false statement of a 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)	
	2007	Hm Bld W	29'6"X 70'	507 K1D 1572	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 350511-3-006-0400	
LOT	BLOCK	PLAT NAME	SECTION/TOWNSHIP/RANGE		
3		Skagit County SP#96-048	11/35N/5 E		
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
Skagit		2		1	
NAME OF REGISTERED OWNER Brian C Gaylord					
NAME OF ADDITIONAL REGISTERED OWNER Barbara A Gaylord					
ADDRESS		CITY	STATE	ZIP CODE	
28330 Ranae Ln		Sedro-Woolley	Wa	98284	
NAME OF LEGAL OWNER Washington Federal Savings					
NAME OF ADDITIONAL LEGAL OWNER					
ADDRESS		CITY	STATE	ZIP CODE	
425 Pike St		Seattle	Wa	98101	
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					
NOTARY SEAL OR STAMP 		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Skagit		Signed or attested before me on 12/13/07	
		by Brian C Gaylord PRINT NAME OF REGISTERED OWNER		Signature	
		by Barbara A Gaylord PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		Title _____ DEALERSHIP POSITION/AGENT/NOTARY		PRINTED NAME OF NOTARY Doreen K. Nystrom	
				AND: County/Office No. OR Dealer No. OR 3/10/10 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 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 # 360-336-4410		BLDG PERMIT # BPCW-1031	
LORI ANDERSON SKAGIT COUNTY PLANNING					
SIGNATURE / POSITION		PERMIT TECHNICIAN		DATE 12/13/07	

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 Doreen Nystrom

Signature of Additional Legal Owner and Title, IF APPLICABLE _____

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

State of Washington

County of Skagit

Signed or attested

before me on 10/31/07by Washington Federal Savings

PRINT NAME OF LEGAL OWNER

Signature Jeanne M Aungst

NOTARY OR AGENT

by Doreen Nystrom, (Branch Manager)

PRINT NAME OF LEGAL OWNER

Jeanne M Aungst

PRINTED NAME OF NOTARY

Title Notary

DEALERSHIP POSITION/AGENT/NOTARY

AND:

County/Office No. OR

Dealer No. OR

Notary Expiration Date

11/13/10**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)**

Lot 3 of Skagit County Short Plat No. 96-048, approved May 4, 2005, and recorded May 6, 2005, under Auditor's File No. 200505060139, records of Skagit County, Washington; being a portion of the Southwest 1/4 of the Southwest 1/4 of the Southeast 1/4 of the Southwest 1/4 of Section 11, Township 35 North, Range 5 East, W.M., records of Skagit County, Washington.

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)

Gregerson's Homes

WA DEALER NUMBER

4341

DATE OF SALE

8-3-06

PURCHASE PRICE

136,160

TAX JURISDICTION/TAX RATE

SNO 8.9%

DEALER'S AUTHORIZED SIGNATURE

[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)

YOUNG VANG

COUNTY OFFICE/VFS OPERATOR NUMBER

2901/25

SIGNATURE

[Signature]

DATE

12-13-07**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 policy of providing equal access to its services.
If you need special accommodation, please contact us.



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