

3/17/2008 Page

**1** of

4 11:45AM

RETURN ADDRESS

## 2200 Rimland Drive Suite 110 Bellingham, WA 98226

page 1084 LAND TITLE OF SI	KAGIT COUNTY 1/3131-S
MANUFACTURED HOME	PLEASE CHECK ONE
ICENSING APPLICATION TITE	TLE ELIMINATION ANSFER IN LOCATION
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.	MOVAL FROM REAL PROPERTY (RCW 46.12.210)
MANUFACTURED HOME	
TRO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDENTIFIC	ATION NUMBER (VIN)
	25380X
2 LAND LEGAL DESCRIPTION PICTOR REAL PROPERTY	TAX PARCEL NUMBER
MANUFACTURED HOME WILL BE AFFIXED REMOVED	1-2-002-0100
LOT BLOCK PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES	
COUNTY NUMBER OF REGISTERED OWNERS NU	MBER OF LEGAL OWNERS
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
294U HOCKMEN	DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL REGISTERED OWNER	DOE COSTOMEN ACCOUNT NOMBEN
ADDRESS CITY	STATE ZIP CODE
3202 OR Honddy Preside	1 CDQ 988755
NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
I was caree are en Char	
ADDRESS CITY	STATE ZIP CODE
Caroldone Hills	CH disper
GRANTEE	
NAME > > > > > > > > > > > > > > > > > > >	- insuling
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE VEHICLE AND THIS INFORMATION IS ACCURATE:	REGISTERED OWNER(S) OF THIS
Signature of Registered Owner and Title, IF APPLICABLE	Stock
A Comment of the comm	Sml
Signature of Additional Registered Owner and Title, IF APPLICABLE  NOTARIZATION/CERTIFICATION FOR REGISTE  NOTARIZATION/CERTIFICATION FOR REGISTER  NOTARIZATION FOR REGISTER  N	RED OWNER(S) SIGNATURE
State or washington Sign	ied or attested
County of  PRINT NAME OF REGISTERED OWNER  AND DEALERSHIP POSITION/AGENT/NOTARY	before me on 31150
Signature Signature Signature	
PRINT NAME OF REGISTERED OWNER	NOTARY OR AGENT
PRINT NAME OF REGISTERED OWNER PRINTED	NAME OF NOTARY
PRINT NAME OF REGISTERED OWNER  AND DEALERSHIP POSITION/AGENT/NOTARY  TITLE COMPANY CERTIFICATION	County/Office No. OR \ \ \
Title DEALERSHIP POSITION/AGENT/NOTARY	Notary Expiration Date
4 TILE COMPANY CERTIFICATION	
I certify that the legal description of the land and ownership is true and correct per the real	
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 Ti	tle Company Representative signs.
5 BUILDING PERMIT OFFICE CERTIFICATION	
I certify that:  I certify that:  I a building permit has been issued for this purpose and the attachm	
NAME (TYPED OR PRINTED)  BLDG PERMIT OFFICE/PHONE #	BLDG PERMIT #
SIGNATURE HOSITION	8/30/04
TD-420-729 MANUF HOMEAPPL (R)2/02/OR (W)Page 1 of 2	9/2/10/

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MANUFACTURED HO	ME - FROM	SECTION 1				
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFIC	ATION NUMBER (	VIN)
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C CICHATURE OF		<u> </u>	1 70 - V G	120		
6 SIGNATURE OF LEGAL OWNER						
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF THE / REMOVAL FROM REAL PROPERTY.  Signature of Legal Owner and Title, IF APPLICABLE						
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Signature of Additional NOTARY SEAL OR ST	7 7 2		LICABLE	_		der Vice Pres
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1 0 0 V 1 1 W				<b>.</b> .		,
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See Harolie	by		44 Ar			
<b>,</b> ,	1 1	PRINT NAME OF LEG	SAL OWNER	PRINTED	NAME OF NOTAR	
				AN	County/Off	ice No. OR iler No. OR
	Tit	DEALERSHIP POSITI	ON/AGENT/NOTARY	AN	Notary Expi	
T LAND DESCRIPT	ION /A long	l desembles of	the land can be of	stained from th	a Josef Count	y Assessor's Office
LAND DESCRIPT	ION (A lega	description of	the land can be of		e local count	y Assessor's Office
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8 DEALER'S REPO			"Protection"	The second of		
				S CLEAR OF EN	ICUMBRANCE	S EXCEPT AS SHOWN.
ANY REQUIRED S	ALES TAX H	AS BEEN COLLI	ECTED.	<u> </u>		Y-1
DEALER NAME (TYPED OR	PRINTED)			WA DEALER N	UMBER	DATE OF SALE
				the management of		
PURCHASE PRICE	TAX JURIS	DICTION/TAX RATE	DEALER'S AUTHORIZED	SIGNATURE		
LISE TAX EX	(EMPT Sale	to a Certified Trib	al member on the res	servation (attach	notarized state	ment of delivery).
			E APPROVAL: (No			,,,
			<del>,,~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~</del>			
		pears to have bee	n completed correctly	, and the applicar	it has sufficient	documentation to proceed
with the recording of the				· · · · · · · · · · · · · · · · · · ·	A STATE OF THE STA	<b>\</b>
NAME MYPED OR PRINTED	)) <u> </u>			COUNTY OFFI	CENTS OPERATO	RNUMBER
hi05+	\ /	711011	,	$-1$ $\alpha$	-70100	<b>*</b>
SIGNATURE	<u> </u>		<del></del>			DATE
SIGNATURE \	<b>,</b> , , ,		1			プライス / スマー
TU D	<u> </u>	<u>ullu</u>	<u> </u>		"Nagarana 19"	4 1010)
10 TITLE FEES					,d <sup>2</sup>	
FILING FEE	APPLICATION	MOBILE HO	ME FEE ELIMINAT	TON FEE US	ETAX	SUBAGENT FEES
		Ì		Ĭ	1	I Design of the State of the St
		<del></del> .				TOTAL FEES & TAX
MOODTANT: O	th!	ioation bas beer	n approved by the	County Audito	r / Vabiole	
MPORTANT: 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.						
CARRIAGANIZA CONTRACTOR CONTRACTO						
APPLICANTS: Once recorded, you must return to a Vehicle Licensing office to file the						
Manufactured Home Application, paying all required fees. Vehicle						
	l	icensing subage	ents charge a serv	ice fee.		1///
			form for Tille File	vication Dans	ual from Dan	I Proporty or
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 cal (360) 902-3600 or TTY (360) 664-8885.

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Seconda ALL-PORTO COLLAND	30000000000000000000000000000000000000		
State of California	)		
777 <b> </b>	SS.		
County of 15 Angeles			
	<b>,</b>		
On $1191207$ , before me,	Elisha Angel		
Date	Name and Title of Officer (e.g., ")ane Doe, Notary Public")		
personally appeared <u>CO</u>	oert Kothleder		
	Name(s) of Signer(s)		
and the second	personally known to me		
	proved to me on the basis of satisfactory evidence		
ELISHA ANGEL	to be the person(s) whose name(s) is/are subscribed		
Commission # 1633206	to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their		
Notary Public - California & Los Angeles County	•		
My Comm. Expires Dec 25, 2009	authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the		
	entity upon behalf of which the person(s) acted,		
	executed the instrument.		
	executed the instrument.		
	WITNESS mythand and official seal.		
	A A A A A A A A A A A A A A A A A A A		
Place Notary Seal Above	ASA XIIII		
	Signature of Notary Public		
OI	PTIONAL ————————————————————————————————————		
	w, it may prove valuable to persons relying on the document		
and could prevent fraudulent removal ar	nd reattachment of this form to another document.		
Description of Attached Document	- 1 1 // // 6		
Title or Type of Document: Man Utaett	used Home Application		
10/0			
Document Date: 1/4/200+	Number of Pages:		
Signer(s) Other Than Named Above:			
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Capacity(ies) Claimed by Signer(s)			
Signer's Name:	Signer's Name:		
Individual  Corporate Officer Title(e):	☐ Individual		
☐ Corporate Officer — Title(s): Partner — ☐ Limited ☐ General RIGHT THUMBPRIF	☐ Corporate Officer — Title(s)		
Attornoy in Fact OF SIGNER	OF SIGNER		
Trustee	e		
☐ Guardian or Conservator	☐ Trustee		
Other:	☐ Guardian or Conservator ☐ Other:		
Signer Is Representing:	Signer Is Representing:		

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4 11:45AM



CHECK THE TYPE OF APPLICATION:

## 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.

		emoval From Real Property ansfer In Location	
LAND:	PROPERTY TAX PARCEL NUMBER:	360417-3-003-0100	
	LEGAL DESCRIPTION:		Address Confessor Victoria Martinia Palitica (Martinia Palitica (Marti
recorde Short P	d May 26, 1994, under Audi lats, page 76, records of Ska	at No. 94-013, approved May 26, 1994, an itor's File No. 9405260001, in Volume 11 agit County, Washington, being a portion Section 17, Township 36 North, Range 4 I	of a of the
under a Plat. S	and across that certain ease aid easement running along	e easement for ingress, egress and utiliti ment area delineated on the face of said g the Northerly 20 feet of Tract 1 of said	Short
Plat No	o. 94-013.		
***************************************			
TD-420-732 AF	PP ATTACHMENT(R/11/00)OR Page 1 of 2		

