

4/11/2008 Page 1 of

2 12:00PM

RETURN ADDRESS			
Almeelly	schel		
9130 FASI	وتعسب	SSENTIN D	אל.
Concreto	WA	98237	
-177		•	

Concrete WA 98237	
LAND TITLE OF SKAGIT COUNTY	
139078-PWE	
WASHINGTON STATE DEPARTMENT OF Manufactured Home Application Anyone who knowlingly makes a false statement of a material fact is guilty	PLEASE CHECK ONE ✓ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY
of a felony, and upon conviction may be punished by a fine, imprisonment, or	both. (RCW 46.12.210)
MANUFACTURED HOME TPO / PLATE NUMBER YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDE	NTIFICATION NUMBER (VIN)
%035712 1992 OAKMA 44 X 28 0691030	
2 LAND LEGAL DESCRIP	
	DPERTY TAX PARCEL NUMBER 000-033-0004, P68145
BLOCK PRESSENTIN CREEK WINDERNES	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NA	
COUNTY NUMBER OF REGISTERED OWNERS SKAGIT	NUMBER OF LEGAL OWNERS 1
NAME OF REGISTERED OWNER AIMEE HIRSCHEL	DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
ADDRESS CITY 9130 EAST PRESSENTIN DRIVE CONCRETE	STATE ZIP CODE WA 98237
NAME OF LEGAL OWNER WASHINGTON MUTUAL	DOL CUSTOMER ACCOUNT NUMBER
NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
ADDRESS CITY 3060 139TH AVE S.E. SUITE 201 BELLEVUE	STATE ZIP CODE WA 98005
GRANTEE	William State
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:	a Hiscarl
Signature of Registered Owner and Title, IF APPLICABLE Signature of Additional Registered Owner and Title, IF APPLICABLE	
NOTARY SEAL OB STAMP NOTARIZATION/CERTIFICATION FOR RE	GISTERED OWNER(S) SIGNATURE
State of Washington County of County of State of Washington County of State of Motal State of Registered Owner State of Registered Owner	Signed or attested 3 -28 - 8 perfore me on 3 -28 - 8 phature Marky OR AGENT
PUBLIC by PRINT NAME OF REGISTERED OWNER PE	INTED NAME/OF NOTARY COUNTY/Office No. OR 2-15-/O Notary Expiration Date
4 TITLE COMPANY CERTIFICATION	
I certify that the legal description of the land and ownership is true and correct per th	
NAME (TYPED OR PRINTED) TITLE COMPANY /	PHONE NUMBER
SIGNATURE / POSITION	DATE
Finalize this application with a Licensing Agent within 10 calendar days of the d	ate Title Company Representative signs.
5 BUILDING PERMIT OFFICE CERTIFICATION	
I certify that: the manufactured home has been affixed to the real property a building permit has been issued for this purpose and the al	tachment will be inspected upon completion.
Sherla Dant Skagt County Planning + Der Signature position	-9410 BLDG PERMIT # (elop ment 98-0122 DATE
TD-420-729 (R/6/06) W Page 1 of 2	eh Nord 8, 2008

MANUFACTU	RED HO	ME - FROM	SECTION 1					
TPO / PLATE NUM	18ER	YEAR	MAKE	LENGTH/WIDTH(FE	- ,	VEHICLE IDENTIFICATION NUMBER (VIN)		
%035712	/4	1992	OAKMA	44 X 28	06	5910304EAE	<u> </u>	
6 SIGNATU								
Sigr	nature of I	Legal Owner	and Title, IF APP	LICABLE	Syl	Dalla Valla Valla	ce Co	real property.
			and Title, IF APP	_				
NOTARY SE	AL OB STA		A CHAP	ION/CERTIF	ICATIO	N FOR LEGA	L OWNER(S) SIGNATURE
My Ag	State	lotary Public of Washin RY K NICHO ent Explication	GION CHES CONTROL OF THE PERMIT NAME OF THE PERMIT	W N I A	ide upl	Signature TO V	NOTARY OR ALL VICTOR AND VICTOR NOTAR COUNTY/Off	tev Yilice No. OR 7 HL 11
 		Tit	DEALERSHIP POŠIT			ANI		aler No. OR
7 LAND DES	SCRIPTION	ON (A legal	description of ti	ne land can be o	btaine	from the loc	cal County A	ssessor's Office)
				All and				
LOT 33, "P OF PLATS,	RESSE! PAGE!	NTIN CREI S 38 AND 3	EK WILDERN 89, RECORDS	ESS DIV. NO. OF SKAGIT C	2", AS OUNT	PER PLAT Y, WASHI	RECORDI NGTON.	ED IN VOLUME 9
CITTLIATE I	NI TELEF	COLDITY	OF SIZACIT S	TATEOFILA	CLUM	TON		
SHUATE	NIHE	COUNTY	OF SKAGIT, S	TATE OF WA	Smin.	JION.		
					gardin Sanggardin da panggardin da sanggardin da sanggardin da sanggardin da sanggardin da sanggardin da sanggardin Sanggardin da sanggardin			
		RT OF SALE			2			
			ATION IS CORRE		LE IS C	LEAR OF EN	CUMBRANCE	ES EXCEPT AS SHOWN.
DEALER NAME (T	YPED OR I	PRINTED)			^	WA DEALER N	JMBER	DATE OF SALE
PURCHASE PRIC	E	TAX JURIS	DICTION/TAX RATE	DEALER'S AUTHOR	NZED SIG	NATURE		
USE	TAX EX	EMPT Sale	to a Certified Tri	bal member on	the rese	ervation (atta	ch notarized	statement of delivery).
9 COUNTY	AUDITO	R/AGENT LIC	CENSING OFFIC	E APPROVAL:	(Not for	use by Suba	agents)	<u> </u>
I certify that the with the record			pears to have bee	n completed corre	ectly, an	d the applican	t has sufficient	documentation to proceed
NAME (TYPED OF	PRINTED) 1	67 - 0.0	5-7 /		COUNTY OFFIC	EAFS OPERATO	OR NUMBER
Tis	220	1	owe	<u> </u>		<u> </u>	<u> </u>	00,
SIGNATURE 10 TITLE FE	ES	rle	adou	4	<u> </u>			DATE 4/11/08
FILING FEE		APPLICATION	MOBILE H	OME FEE ELIN	MINATION	FEE USI	E TAX	SUBAGENT FEES
MPORTANT	Lic Re	ensing Office tain proof o	cation has bee ce, take your ap f the recording pplication form,	plication form t fees paid. If the	o the C Reco	County Recording Office (rding Office. retains	TOTAL FEES & TAX
		! 	Once recorded, Manufactured H icensing subag	lome Applicatio ents charge a s	n, pay service	ng all requir fee.	ed fees. Vel	hicle
			completing this					

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) 664-9000

TD-420-729 (R/6/06) W Page 2 of 2

