

RETURN ADDRESS



200804290188
Skagit County Auditor

4/29/2008 Page 1 of 2 2:00PM

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					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
7091088	1994	Libby Fleetwood	66 X 28	09L27531XU	
2 LAND					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER P117707	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
2		S/P #PL01-0296, S15 T35 R7E W.M.			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		2		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Roy M. Suhr					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Kathy A. Suhr					
ADDRESS		CITY	STATE	ZIP CODE	
8394 Emmanuel Lane		Concrete	WA	98237	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
GRANTEE					
NAME					
Same as 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 <i>Roy M Suhr</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Kathy A Suhr</i>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
State of Washington		County of		Signed or attested before me on	
		SKAGIT		4/28/08	
by <i>Roy M Suhr</i>		Signature		<i>K. Franey</i>	
PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT			
by <i>Kathy A. Suhr</i>		PRINTED NAME OF NOTARY		<i>K. FRANEY</i>	
PRINT NAME OF REGISTERED OWNER		County/Office No. OR		AND: Dealer No. OR	
		11-02-10		Notary Expiration Date	
Title		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 checked="" 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 #		BLDG PERMIT #	
Kate Sharp		360-336 9410 x5780		BP01-1121	
SIGNATURE / POSITION		DATE			
<i>Kate Sharp</i>		Support Services		4-29-08	

MANUFACTURED HOME - FROM SECTION 1				
TPO / PLATE NUMBER Z091088	YEAR 1994	MAKE Libby Fleetwood	LENGTH/WIDTH(FEET) 66 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 09L27531XU
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 _____				
Signature of Additional Legal Owner and Title, IF APPLICABLE _____				
NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington County of _____ Signed or attested before me on _____ by _____ Signature _____ <small>PRINT NAME OF LEGAL OWNER</small> <small>NOTARY OR AGENT</small> by _____ <small>PRINT NAME OF LEGAL OWNER</small> <small>PRINTED NAME OF NOTARY</small> Title _____ AND: County/Office No. OR <small>DEALERSHIP POSITION/AGENT/NOTARY</small> Dealer No. OR <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. PL01-0296, approved August 13, 2001 and recorded August 14, 2001, under Auditor's File No. 200108140104 and being a portion of the Southwest 1/4 of the Northeast 1/4, 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 said Short Plat 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)		WA DEALER NUMBER	DATE OF SALE	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE		
<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) <i>Gabrielle Clay</i>		COUNTY OFFICE/IFS OPERATOR NUMBER <i>2901-27</i>		
SIGNATURE <i>Gabrielle Clay</i>		DATE <i>4-29-08</i>		
10 TITLE FEES				
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX
				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) 664-8885.



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