



200805230005
Skagit County Auditor

5/23/2008 Page 1 of 2 9:22AM

RETURN ADDRESS

Don R. Decker
8285 Cedar Grove Ave
Concrete WA 98237

128920 - SWE

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					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2007	HBNW	40 X 26	HB 3492 OR	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER 3877-000-007-0007, P64065	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
7		Cedargrove On The Skagit			
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				DOL CUSTOMER ACCOUNT NUMBER	
Don R. Decker					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Amanda M. Decker					
ADDRESS				CITY	STATE ZIP CODE
8285 Cedar Grove Avenue, Concrete, WA 98237					
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Countrywide Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS				CITY	STATE ZIP CODE
32785 SR 20, Suite 5, Oak harbor, WA 98277					
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 <i>Don R. Decker</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Amanda M. Decker</i>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on 3-26-08	
		County of Skagit			
		by Don R. Decker		Signature <i>Cindy L. Frydenlund</i>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Amanda M. Decker		Signature <i>Cindy L. Frydenlund</i>	
PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY		County/Office No. OR	
Title Notary		AND: Dealer No. OR 2-15-10		Notary Expiration Date	
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 # 360-336-9410		BLDG PERMIT #	
LORI ANDERSON SKAGIT COUNTY PLANNING				BP06-1388	
SIGNATURE / POSITION		DATE			
<i>Lori Anderson</i> PERMIT TECHNICIAN		4-3-08			

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2007	HBNW	40 X 26	HB 3492 OR	
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>[Signature]</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
<div style="border: 1px solid black; padding: 5px;"> KAREN A. HUFF NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES SEPTEMBER 19, 2011 </div>		State of Washington		Signed or attested before me on <u>3/27/08</u>	
		County of <u>Island</u>			
		by <u>Tony Replinski</u>		Signature <u>Karen A Huff</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by <u>Karen A Huff</u>		PRINTED NAME OF NOTARY			
Title <u>Notary Public</u>		AND: County/Office No. OR		Dealer No. OR <u>19-19-2011</u>	
DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 7, CEDARGROVE ON THE SKAGIT, as per plat recorded in Volume 9 of Plats, pages 48 through 51, inclusive, 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)		WA DEALER NUMBER		DATE OF SALE	
<u>Olympic Homes</u>		<u>4779</u>		<u>1/31/07</u>	
PURCHASE PRICE <u>\$4,000</u>	TAX JURISDICTION/TAX RATE <u>8.0% Skagit</u>	DEALER'S AUTHORIZED SIGNATURE <u>[Signature]</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>YOUNG VANG / Shannon King</u>		<u>2901/25 / 290133</u>			
SIGNATURE <u>[Signature]</u>		DATE		<u>4-7-08</u>	
				<u>5/23/08</u>	
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 call (360) 902-3600 or TTY (360) 664-8885.



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