

**RETURN ADDRESS**

Land Title Company  
 P.O. Box 445  
 Burlington, WA 98233  
 130611-PE



200808250137  
 Skagit County Auditor

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**LAND TITLE OF SKAGIT COUNTY**

WASHINGTON STATE 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)					
<b>1 MANUFACTURED HOME</b>					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
%114962	1995	FLEETWOOD	44 X 28	ORFLS48AB20266	
<b>2 LAND</b> LEGAL DESCRIPTION ON PAGE <u>3</u>					
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 350404-1-003-0006/P35764	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
				4/35N/4E	
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b> ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
29	1 (one)		1 (one)		
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Richard A. Ackerman					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE	ZIP CODE
6448 F & S Grade Road		Sedro Woolley		WA	98284
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Wells Fargo Bank					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Wells Fargo Bank, N.A.					
ADDRESS		CITY		STATE	ZIP CODE
P.O. Box 31557 MAC B6955-013		Billings		MT	59107-9900
<b>GRANTEE</b>					
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>Richard A. Ackerman</i>	
Signature of Additional Registered Owner and Title, IF APPLICABLE					
<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>					
State of Washington		County of Skagit		Signed or attested before me on 8-20-08	
by Richard A. Acherman		Signature <i>Kerry L. Larson</i>		NOTARY OR AGENT	
by <del>Karen Ashley</del>		Signature <i>Kerry L. Larson</i>		PRINTED NAME OF NOTARY	
Title Escrow <del>officer</del> Notary		AND: County/Office No. OR 8-06-2011		Dealer No. OR	
DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date 8/11/2010			
<b>4 TITLE COMPANY CERTIFICATION</b>					
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			
Karen Ashley		Land Title Company (360)707-2158			
SIGNATURE / POSITION		DATE			
<i>Karen Ashley</i> Escrow Officer/LPO		8/13/08			
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
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 #		BLDG PERMIT #	
Cindy Gauthier		94-1701		944701	
SIGNATURE / POSITION		DATE			
<i>Cindy Gauthier</i> Planning & Development		8-14-08			

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER Z114962	YEAR 1995	MAKE FLEETWOOD	LENGTH/WIDTH(FEET) 44 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) ORFLS48AB20266	
<b>6 SIGNATURE OF LEGAL OWNER</b>					
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.					
Signature of Legal Owner and Title, IF APPLICABLE <i>[Signature]</i> VP LEAD DOCUMENTATION					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>					
NOTARY SEAL 		State of Washington County of <u>KING</u>		Signed or attested before me on <u>8/22/08</u>	
		PRINT NAME OF LEGAL OWNER <u>ALVIN Y. WONG, VP</u>		Signature <i>[Signature]</i> NOTARY OR AGENT	
		PRINT NAME OF LEGAL OWNER <u>Notary</u>		PRINTED NAME OF NOTARY <u>Shannon Hoffman</u>	
		DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR <u>4/29/12</u> Notary Expiration Date	
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>					
See Legal Description attached					
<b>8 DEALER'S REPORT OF SALE</b>					
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).					
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>					
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) <u>Husty Lowery</u>			COUNTY OFFICER'S OPERATOR NUMBER <u>290108</u>		
SIGNATURE <i>[Signature]</i>			DATE <u>8/25/08</u>		
<b>10 TITLE FEES</b>					
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
					TOTAL FEES & TAX
<b>IMPORTANT:</b> 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.					
<b>APPLICANTS:</b> 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 1-800-541-5200 or TTY 1-509-554-2095.



Escrow No.: 130611-PE

**EXHIBIT "A"**

**LEGAL DESCRIPTION**

That portion of the Southwest  $\frac{1}{4}$  of the Northeast  $\frac{1}{4}$  of Section 4, Township 35 North, Range 4 East, W.M., lying Northerly of the Old Fairhaven and Southern Railroad right of way (now County road), and Southerly of the Samish River, EXCEPT that portion thereof conveyed to Skagit County for road purposes by deed dated and recorded June 14, 1949, under Auditor's File No. 432463 AND ALSO EXCEPT that portion thereof conveyed to Skagit County for road purposes by deed dated May 14, 1973, recorded May 16, 1973, under Auditor's File No. 785078.

Situate in the County of Skagit, State of Washington.



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