

RETURN ADDRESS



200811060026

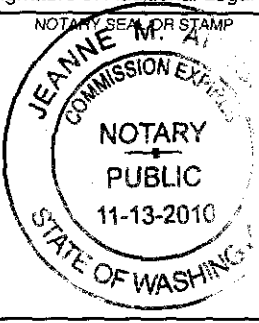
Skagit County Auditor

11/6/2008 Page

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3 10:16AM

STATE OF WASHINGTON 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)					
1 MANUFACTURED HOME					
TPO / PLATE NUMBER 46974	YEAR 1988	MAKE CAMP	LENGTH/WIDTH(FEET) 66 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 32910645X46	
2 LAND					
LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED					
REAL PROPERTY TAX PARCEL NUMBER P12345 P126492					
LOT 2	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE 06 34 10		QUARTER/QUARTER SECTION	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
NAME OF REGISTERED OWNER Donald L Gordon					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL REGISTERED OWNER PO 48					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS Sebecoolley					
CITY					
STATE WA					
ZIP CODE 98284					
NAME OF LEGAL OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
WASHINGTON FEDERAL SAVINGS					
DOL CUSTOMER ACCOUNT NUMBER					
NAME OF ADDITIONAL LEGAL OWNER					
DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS 425 PIKE ST					
CITY SEATTLE					
STATE WA					
ZIP CODE 98101					
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 Donald L Gordon					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington County of Skagit			
		Signed or attested before me on 11-6-08			
		by Glenn Signature PRINT NAME OF REGISTERED OWNER NOTARY OR AGENT			
		by Glenn Signature PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY			
		Title County/Office No. OR DEALERSHIP POSITION/AGENT/NOTARY Dealer No. OR 2901-27 Notary Expiration Date			
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 # 360-336-9416 BLDG PERMIT # BP07-1174					
SIGNATURE / POSITION Lori Anderson SKAGIT COUNTY PLANNING Permit Technician DATE 10/27/08					

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
			X		
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>Doreen Nystrom</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of <u>Skagit</u>		before me on <u>10/27/08</u>	
		by <u>Washington Federal Savings</u>		Signature <u>Jeanne Aungst</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by <u>Doreen Nystrom, Branch</u>		<u>Jeanne Aungst</u>			
PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY			
Title _____		AND: County/Office No. OR			
DEALERSHIP POSITION/AGENT/NOTARY		Dealer No. OR		<u>11/13/10</u>	
		Notary Expiration Date			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
See attached					
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)			COUNTY OFFICE/VFS OPERATOR NUMBER		
<u>Gabrielle Clay</u>			<u>2901-27</u>		
SIGNATURE			<u>gclay</u>	DATE	<u>11-6-08</u>
			<u>2901-27</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) 892-3600 or TTY (360) 664-8885.



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A portion of the NW1/4 NW1/4 described as follows: Beginning at the SE corner of Lot 2 of Short Plat#PL03-0772; thence N 00-17-08 E along the east line, 90 feet; thence N 89-41-19 W, 210 feet to point of beginning; thence N 00-17- 08 E, along said east line, 415 feet, thence N 89-41-49 W, parallel with the South line of said lot 2, 140 feet; thence South 00-17-W, 415 feet; thence South 89-41-49 West, 140 feet to the point of beginning.



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