

200811130083 Skagit County Auditor

RETURN ADDRESS
Jeffrey E. Heath

	<b></b> 11/1	13/2008 Page	1 of	2 11:49AN
P.O. Box 3002	<u> </u>			
Winthrop, WA 98862				
LAND TITLE OF SKAGIT COUNTY	<del></del>			
129821-pae				
Manufactured Hom LICENSING Application		TRANSFER IN LOCATION		
Anyone who knowingly makes a false statement of a mate of a falony, and upon conviction may be punished by a fi	rial fact is guilty ne. imadsonment. or t	oth. (RCW 46.12.210)	1	
MANUFACTURED HOME				
	WIDTH(FEET) VEHICLE IDEN	ITIFICATION NUMBER (VIN)		
@44826 1975 MARLE 70		LYS40600		
2 LAND	LEGAL DESCRIP			
MANUFACTURED HOME WILL BE AFFIXED   REN		PERTY TAX PARCEL NUMBER 1/350319-4-005-0002		
ot BLOCK PLAT NAME OR SECTION Skagit County Sho	township/riange ort Plat No. PL-06-25	QUARTER/QUARTER SECT SW 1/4 of SE 1/4		
GRANTOR(S) REGISTERED/LEGAL OWNER(S)	ADDITIONAL NA			
COUNTY NUMBER OF REGISTE	RED OWNERS	NUMBER OF LEGAL OWNERS	)	
NAME OF REGISTERED OWNER JEFFREY E. HEATH	.e.	DOL CUSTOMER AC HEATHJE482		
NAME OF ADDITIONAL REGISTERED OWNER	<u> </u>	DOL CUSTOMER AC		
	<u> </u>	STATE ZIP CODE		
	HTY WINTHROP	WA 98862	}	
NAME OF LEGAL OWNER	200	DOL CUSTOMER AC	COUNT NUMBER	
BANK OF AMERICA	<u>,                                 </u>	DOL CUSTOMER AC	COLBITANUISCO	
NAME OF ADDITIONAL LEGAL OWNER		DOLCOSTOMEN AC	CODAL INDINDER	
	orry.	STATE ZIP CODE		
100 N. Tryon Street C	harlotte	NC 2825	,5	
GRANTEE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
NAME			İ	
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:	<u> </u>	1/1/2	<u> </u>	
Signature of Registered Owner and Title, IF APPLIC	ABLE	1) Heal	<u> </u>	
Signature of Additional Registered Owner and Title, IF APPLIC	CABLE		~ _l	
		SISTERED OWNER(S) SIGNA	TURE	
A COUNTRY OF THE PARTY OF THE P	kagit	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ام( 80/ تد	
County of	Vagir	before me on	~/°~//	
Jeffrey E.	Heath sig		>= H	>
PRINT NAME OF REGISTERED		NOTARY OR AGENTAL		
<b>★</b>		ennifer J. Li	1d/	
PUBLIC Notary	OWNER PRO	COUNTY/Office No. OR	10/01/20	010
THIS DEALERSHIP POSITION/AGENT	MOTARY	AND: Dealer No. OR Notary Expiration Date		
The company of the Cation				
cells that fields a position of the land and ownership is			and the second second	
NAME (TYPES AND	TITLE COMPANY (P	PHONE NUMBER		
SIGNATURE / POSITION		DATE	- <u>- 2</u>	
Finalize this application with a Licensing Agent within 10 o	alendar days of the da	ita Title Company Representa	itive signs.	N ZJ
5 BUILDING PERMIT OFFICE CERTIFICATION				C 2021 F
I certify that: the manufactured home has been affi	xed to the real property this purpose and the att	as described. achment will be inspected upo	n completion.	
NAME (TYPED OR PRINTED) BLDG PERMI	TOFFICE/PHONE # 3/01)	336 BLOG PERMIT		$ -jU_{j} $
LORI ANDERSON SKAGIT CAUS	ITU PLOMNINI	49410 96.155	フ	

PERMIT TECHNICIAN

AANUFACTURED HON	ME - FROM SECTION 1			
20 July 20 L	YEAR MAKE		VEHICLE IDENTIFICATION NUMBER	(VIN)
@44826	1975 MARLE	70 X 14	H14270FLYS40600	
SIGNATURE OF LE	GAL OWNER			
SIGNATURE OF LEGAL	OWNER INDICATES CO	NSENT FOR ELIMINAT	ION OF TITLE / FEMOVAL FR	M REAL PROPERTY.
	£ ,£		note a Alk to	<i>y</i>
Signature of L	egal Owner and Title, IF /	APPLICABLE	$\omega_{\omega_{i}}$	
			V	1
	egal Owner and Title, IF A			
NOTARY SEAL OR STAI	" NOT	ABIZATION/CERTIFIC	ATION FOR LEGAL OWNER(	S) SIGNATURE
•	State of Washin	GG VI	Signed or attests	ed alcolar
	Coun	y of Luashing	tor before me	on 7112/08
	76.	a. tall	1.7	0.0
	by CAM	ea lette	Signature	Bulling Y RULING
	PRINT NAME O	FLEGAL OWNER	COO NOTARY COR	
	by 🕾 😅			Tavernan
	PRINT NAME O	FLEGAL OWNER	PRINTED NAME OF NOTA	ARY
	Title			office No. OR 9/4/20/0
	DEALERSHIP P	OSITION/AGENT/NOTARY	Notary E	piration Date
ALAND DESCRIPTION	N (A legal description	of the land can be obt	ained from the local County	Assessor's Office)
Auditor's File No. 2		of Skagit County, W	ust 2, 2006, recorded Augu ashington, being a portion st, W.M.	
		J. P. C.		
		s and utilities as deli	neated on the face of said s	hort plat over and
across Lot 3 of said:	short plat.			
		A A		
Situate in the County	y of Skagit, State of W	ashington.	and the state of t	ļ
		200	and the second of the second o	
DEALER'S REPOR	TOFSALE			
I CERTIFY THAT TH	IS INFORMATION IS CO		IS CLEAR OF ENCUMBRAN	CES EXCEPT AS SHOWN.
ANY REQUIRED SA DEALER NAME (TYPED OR P	LES TAX HAS BEEN CO	PLLECTED.	WA DEALER NUMBER	DATE OF SALE
DEALER NAME (1 THED ON H	AINT EU)		MA DECENTAGES	DATE OF SACE
		ATE   DEALER'S AUTHORIZE		
PURCHASE PRICE	TAX JURISDICTION/TAX FU	ATE DEALERS AUTHORIZE	USIGNATUHE	
	<u></u>			- 1
			reservation (attach notarize	d statement of delivery).
COUNTY AUDITOR	VAGENT LICENSING OF	FFICE APPROVAL: (N	ئر (or use by Subagents)	and the second
certify that the above a	pplication appears to have	been completed correct	ly, and the applicant has spliticie	nt documentation to proceed
with the recording of this	i form.		<u> </u>	100 to
NAME (TYPEO OF PRINTED)	- 16 CI	<i>a</i>	COUNTY OFFICE VIEW OF CHIEF	TOR NUMBER
16 OV		au _	04011	
SIGNATURE/			2 months	DATE O
U			ly 1201-161	13:00
() TITLE FEES		71	<b>₹</b>	* NF H 3*
FILING FEE A	PPLICATION MOBI	LE HOME FRE LIMIN	ATTON FE USE TAX	SUBAGENTFEES
<del></del> _				TOTAL FEES 8 TAX
MPORTANT: On	ne the englication has	heen approved by th	e County Auditor / Vehicle	
			the County Recording Office	e <u>L</u>
			Recording Office retains	T. N. M.
			copy of the recorded form	. \
,,,,				<del></del>
APPLIC			to a Vehicle Licensing offic	
			paying all required fees. V	ehicle
ļ	licensing su	bagents charge a se	rvice fee.	]
For full inst	ructions on completing	this form for Title El	imination, Removal from R	eal Property or
			red Home Application Inst	

The Department of Licensing has a policy of providing equal access to its services if you need special accommodation, please cal (360)