

## RETURN ADDRESS

WASHINGTON FEDERAL SAVINGS

Mount Vernon Office

PO Box 639

Mount Vernon, WA 98273



200901220007

Skagit County Auditor

1/22/2009 Page

1 of

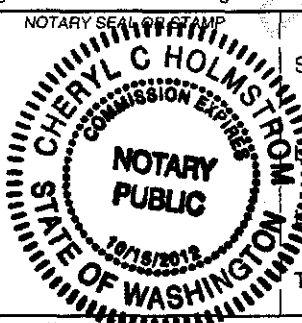
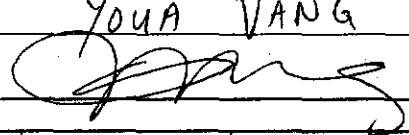
2 9:11AM

346856-8

Land Title #130461-PW

LAND TITLE OF SKAGIT COUNTY

STATE OF WASHINGTON Department of <b>licensing</b>		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 NEW	YEAR 2009	MAKE Homebuilders Northwest	LENGTH/WIDTH(FEET) 64 X 40	VEHICLE IDENTIFICATION NUMBER (VIN) HB 37160R	
<b>2 LAND</b>		LEGAL DESCRIPTION ON PAGE 2			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 4949-000-005-0000 P127380	
LOT 5	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE RUSSELL ROAD ESTATES		QUARTER/QUARTER SECTION	
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>		ADDITIONAL NAMES ON PAGE 2			
COUNTY NUMBER 029	NUMBER OF REGISTERED OWNERS 2		NUMBER OF LEGAL OWNERS		
NAME OF REGISTERED OWNER VERNON MCCARTY		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL REGISTERED OWNER FAIREE MCCARTY		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS 39882 Maple Tree Lane		CITY Concrete	STATE WA	ZIP CODE 98237	
NAME OF LEGAL OWNER WASHINGTON FEDERAL SAVINGS		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS 1501 Riverside Dr.		CITY Mount Vernon	STATE WA	ZIP CODE 98273	
<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>Vernon McCarty</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Fairee McCarty</i>					
<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>					
State of Washington County of Skagit		Signed or attested before me on 8-1-08			
by VERNON MCCARTY PRINT NAME OF REGISTERED OWNER		Signature <i>Cheryl C. Holmstrom</i> NOTARY OR AGENT			
by FAIREE MCCARTY PRINT NAME OF REGISTERED OWNER		Cheryl C. Holmstrom PRINTED NAME OF NOTARY			
Title Notary DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 10-15-08 Notary Expiration Date			
<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			
SIGNATURE / POSITION		DATE			
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) Elaine M Pitman		BLDG PERMIT OFFICE/PHONE # 336-9410		BLDG PERMIT # BP08-0315	
SIGNATURE / POSITION Elaine Pitman, Permit Technician				DATE 1-15-09	

MANUFACTURED HOME - FROM SECTION 1					
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH/FEET	VEHICLE IDENTIFICATION NUMBER (VIN)	
NEW	2009	Homebuilders Northwest	64 X 40	HB 3716 OR	
<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 <u>Allen L. Collins, Vice President</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE _____					
		<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b> State of Washington _____ County of <u>Skagit</u> Signed or attested before me on <u>12-9-08</u> <u>WASHINGTON FEDERAL SAVINGS</u> Signature <u>Cheryl C. Holmstrom</u> PRINT NAME OF LEGAL OWNER NOTARY OR AGENT --- PRINTED NAME OF NOTARY <u>CHERYL C. Holmstrom</u> Title <u>Notary</u> County/Office No. OR DEALERSHIP POSITION/AGENT/NOTARY AND: Dealer No. OR <u>1015-12</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>					
Lot 5, "RUSSELL ROAD ESTATES," as per plat recorded February 19, 2008, under Auditor's File No. 200802190194, records of Skagit County, Washington.  Situate in the County of Skagit, State of Washington.					
<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	
<u>Olympic Homes Northwest Inc.</u>			<u>4779</u>	<u>10/1/08</u>	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE			
<u>137,592.00</u>	<u>Skagit 8.0</u>	<u>MS - 28</u>			
<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)			COUNTY OFFICE/VES OPERATOR NUMBER		
<u>YOUNG VANG</u>			<u>2901/2009</u>		
SIGNATURE			DATE		
			<u>10-22-09</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.  <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <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.         </div> 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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Skagit County Auditor