

RETURN ADDRESS

Golf Escrow Corporation
6100 219th Street SW #440
Mountlake Terrace, WA 98043

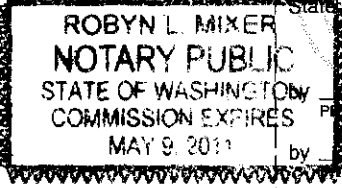


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Skagit County Auditor

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#20080583

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		GUARDIAN NORTHWEST TITLE CO.			
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2009	PLTND	70 X 42	ORFL84832497-FE13	
2 LAND		LEGAL DESCRIPTION ON PAGE			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER	
				350401-1-002-000	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
Ptn Lot 1		31-T35-R4			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)		ADDITIONAL NAMES ON PAGE			
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		1		
NAME OF REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
LONNIE M. MARTINEZ					
NAME OF ADDITIONAL REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
JUDI L. MARTINEZ					
ADDRESS		CITY	STATE	ZIP CODE	
23682 Brightwood Lane, Sedro Woolley, WA				98284	
NAME OF LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
GOLF SAVINGS BANK					
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS		CITY	STATE	ZIP CODE	
PO. BOX 5010, Lynnwood, WA				98046	
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>Lonnie M. Martinez</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Judi L. Martinez</i>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY SEAL OR STAMP		State of Washington		Signed or attested before me on	
		County of Snohomish		8-27-08	
		by Lonnie M. Martinez		Signature <i>Pamela J. Lane</i>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by Judi L. Martinez		<i>Pamela J. Lane</i>	
		PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY	
		Title Notary		County/Office No. OR 3-6-10	
		DEALERSHIP POSITION/AGENT/NOTARY		AND: Dealer No. OR 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 type="checkbox"/> the manufactured home has been affixed to the real property as described.					
<input checked="" 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 #	
Kate Sharp		360-336-9410 x5780		BP08-0655	
SIGNATURE / POSITION		DATE			
<i>Kate Sharp</i>		Permit Tech		2-12-09	

MANUFACTURED HOME - FROM SECTION 1					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2009	FLTWD	70 X 42	ORFL84832497-FE13	
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>VP</u>					
Signature of Additional Legal Owner and Title, IF APPLICABLE <u>GOLF SAVINGS BANK</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on <u>9/22/09</u>	
		County of <u>Snohomish</u>			
		DAVID S. PEARSON <u>VP</u>		Signature <u>[Signature]</u>	
		PRINT NAME OF LEGAL OWNER		NOTARY OR AGENT	
by <u>GOLF SAVINGS BANK</u>		PRINTED NAME OF NOTARY			
Title		DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR <u>5/9/11</u> Dealer No. OR Notary Expiration Date	
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)					
Lot 1, Short Plat No. 07-0226, approved March 3, 2008 recorded March 5, 2008 under Auditor's File No. 200803050027, being a portion of Government Lot 1, Section 1, Township 35 North, Range 4 East, W.M. Together with a non-exclusive easement for ingress egress and utilities as described in Easement Exchange Agreement recorded Oct 6, 2005 under Auditor's File 200510060129					
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>Coach Corral Homes</u>			<u>4278</u>	<u>6-20-08</u>	
PURCHASE PRICE	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE			
<u>162,800</u>	<u>8.0</u>	<u>Ray P. Archer</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</u>			<u>2901/25</u>		
SIGNATURE <u>[Signature]</u>			DATE <u>2-12-09</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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Schedule "C"
Legal description

The land referred to in this report/policy is situated in the State of Washington, County of Skagit, and is described as follows:

Lot 1, Short Plat No. 07-0226, approved March 3, 2008, recorded March 5, 2008 under Auditor's File No. 200803050027, being a portion of Government Lot 1, Section 1, Township 35 North, Range 4 East, W.M..

TOGETHER WITH a non-exclusive easement for ingress, egress and utilities as described in Easement Exchange Agreement recorded October 6, 2005 under Auditor's File No. 200510060129.



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