



200903310078

Skagit County Auditor

3/31/2009 Page

1 of

2 1:14PM

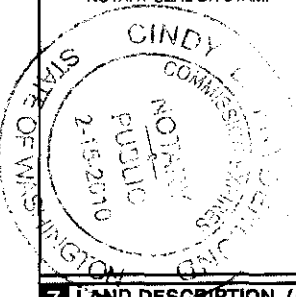
RETURN ADDRESS

Johnny Frizzell
44810 Calles View DR
Concrete WA 98237

131119- PWE

LAND TITLE OF SKAGIT COUNTY

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					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH (FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
\$51188	1978	PEERL	60 X 24	09L13404XU	
2 LAND LEGAL DESCRIPTION ON PAGE _____					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED				REAL PROPERTY TAX PARCEL NUMBER P43990, 350816-0-001-0101	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
		16-35-8		PTN NE 1/4 NE 1/4 & GL2	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
SKAGIT		2		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
FRIZZELL, JOHNNY					
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
FRIZZELL, JANINE					
ADDRESS		CITY	STATE	ZIP CODE	
44810 CALLES VIEW DRIVE		CONCRETE	WA	98237	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
SKAGIT STATE BANK					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY	STATE	ZIP CODE	
PO BOX 285		BURLINGTON	WA	98233	
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 <u>Johnny R Frizzell</u>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <u>Janine Frizzell</u>					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested	
		County of <u>Skagit</u>		before me on <u>11-25-08</u>	
		by <u>Johnny Frizzell</u>		Signature <u>Cindy L. Frydenlund</u>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by <u>Janine Frizzell</u>		PRINTED NAME OF NOTARY	
PRINT NAME OF REGISTERED OWNER		Title <u>Notary</u>		AND: County/Office No. OR	
DEALERSHIP POSITION/AGENT/NOTARY				Dealer No. OR	
				Notary Expiration Date <u>2-15-10</u>	
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 # <u>360-336-9410</u>		BLDG PERMIT #	
LORI ANDERSON		SKAGIT PLANNING DEPT.		BPC080904	
SIGNATURE / POSITION		DATE			
<u>Lori Anderson</u>		PERMIT TECHNICIAN		2/23/09	

MANUFACTURED HOME - FROM SECTION 1				
TPO / PLATE NUMBER S51188	YEAR 1978	MAKE PEERL	LENGTH/WIDTH(FEET) 60 X 24	VEHICLE IDENTIFICATION NUMBER (VIN) 09L13404XU
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 <i>Jerry D Holman Vice President</i>				
Signature of Additional Legal Owner and Title, IF APPLICABLE				
NOTARY SEAL OR STAMP 	NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE State of Washington County of <i>Skagit</i> Signed or attested before me on <i>11-25-08</i> by <i>Jerry D Holman</i> Signature <i>Cindy L Freyland</i> <small>PRINT NAME OF LEGAL OWNER NOTARY OR AGENT</small> by _____ <small>PRINT NAME OF LEGAL OWNER</small> Title <i>Notary</i> AND: County/Office No. OR Dealer No. OR <i>245-10</i> <small>DEALERSHIP POSITION/AGENT/NOTARY Notary Expiration Date</small>			
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)				
Tract 4 of Short Plat No. 43-77, approved August 11, 1977, recorded August 12, 1977, under Auditor's File No. 862555, in Volume 2 of Short Plats, page 103, being a portion of the Northeast 1/4 of Section 16, Township 35 North, Range 8 East, W.M. TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over and across that certain 60 foot strip shown on the face of said Short Plat as "Dalles View Drive". ALSO, TOGETHER WITH an undivided 1/4 interest in that certain 60 foot strip shown on the face of said Short Plat as "Dalles View Drive". Situate in the County of Skagit, State of Washington.				
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) <i>Kirsty Lowery</i>		COUNTY OFFICE/VFS OPERATOR/NUMBER <i>290708</i>		
SIGNATURE <i>Kirsty Lowery</i>		DATE <i>3/31/08</i>		
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.				
<div style="border: 1px solid black; padding: 5px;"> 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. </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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