



200906220185
Skagit County Auditor

6/22/2009 Page 1 of 2 3:40PM

RETURN ADDRESS

STATE OF WASHINGTON
Department of
Licensing

MANUFACTURED HOME APPLICATION

PLEASE CHECK ONE

TITLE ELIMINATION
 TRANSFER IN LOCATION
 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 YEAR MAKE LENGTH/WIDTH(FEET) VEHICLE IDENTIFICATION NUMBER (VIN)
TPO 014441995 SKYLINE 44X28 2G9105644 AB

2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER
F-100137

LOT BLOCK PLAT NAME OR SECTION/TOWNSHIP/RANGE QUARTER/QUARTER SECTION
13 WILDA MT. VIEW ESTATES

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 DOL CUSTOMER ACCOUNT NUMBER
CHERI M. MARTIN

NAME OF ADDITIONAL REGISTERED OWNER DOL CUSTOMER ACCOUNT NUMBER

ADDRESS CITY STATE ZIP CODE
2400 DONOVAN AVE #11 BELLINGHAM WA 98229

NAME OF LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER
SAME AS ABOVE

NAME OF ADDITIONAL LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER

ADDRESS CITY STATE ZIP CODE

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 *Cheri Martin*

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 WHATCOM Signed or attested before me on
by CHERI M. MARTIN Signature NOTARY OR AGENT
by RON DIGGERSTAFF PRINTED NAME OF NOTARY
Title PRE-OWNED HOME MANAGER AND: County/Office No. OR 4278 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
BILL ROHANE LAND TITLE & ESCROW 707-2158

SIGNATURE POSITION DATE
Bill Rohane COORDINATOR 6/18/09

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: the manufactured home has been affixed to the real property as described.
 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 #
SIGNATURE / POSITION DATE

MANUFACTURED HOME - FROM SECTION 1				
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
TPO	1995	SKYLINE	44X 28	2G910564HAB

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 _____
 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 _____	Signed or attested before me on _____
	by PRINT NAME OF LEGAL OWNER _____	Signature _____ NOTARY OR AGENT
	by PRINT NAME OF LEGAL OWNER _____	PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR Notary Expiration Date
Title DEALERSHIP POSITION/AGENT/NOTARY _____	AND:	

7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)

LOT 13 WILDA MOUNTAINVIEW ESTATES AS PER PLAT
 RECORDED IN VOLUME 15 OF PLATS AT PAGES 20 TO 22
 INCLUSIVE, IN THE RECORDS OF SKAGIT COUNTY, 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) COACH CORAL, INC	WA DEALER NUMBER 4278	DATE OF SALE 12/10/08
PURCHASE PRICE \$38,500.00	TAX JURISDICTION/TAX RATE	DEALER'S AUTHORIZED SIGNATURE <i>[Signature]</i> VEE-OWNER NAME HANDLED
<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) Kirsty Lowery	COUNTY OFFICE/VEHICLE OPERATOR NUMBER 2910108
SIGNATURE <i>[Signature]</i>	DATE 6/18/09

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 1-800-661-8885.



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