



200908180029

Skagit County Auditor

8/18/2009 Page 1 of 2 12:41PM

RETURN ADDRESS

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**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**

TP# / PLATE NUMBER 9012929	YEAR 1994	MAKE Flw	LENGTH/WIDTH (FEET) 44 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) OR FLR 4818382LP
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**2 LAND**

LEGAL DESCRIPTION ON PAGE

MANUFACTURED HOME WILL BE  AFFIXED  REMOVED

REAL PROPERTY TAX PARCEL NUMBER  
P23060

LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE	QUARTER/QUARTER SECTION 1/34/4Ewn
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**3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE**

COUNTY NUMBER 29	NUMBER OF REGISTERED OWNERS	NUMBER OF LEGAL OWNERS
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NAME OF REGISTERED OWNER Johnson, Danny N.	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF ADDITIONAL REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER WA98284
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ADDRESS 7430 Valley View Rd Sedro Woolley	CITY Sedro Woolley	STATE WA	ZIP CODE
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NAME OF LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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NAME OF ADDITIONAL LEGAL OWNER	DOL CUSTOMER ACCOUNT NUMBER
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ADDRESS	CITY	STATE	ZIP CODE
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**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 *[Signature]*

Signature of Additional Registered Owner and Title, IF APPLICABLE

NOTARY SEAL OR STAMP	<b>NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</b>	
	State of Washington County of Skagit	Signed or attested before me on 8/17/09
	by <i>[Signature]</i> PRINT NAME OF REGISTERED OWNER	Signature <i>[Signature]</i> NOTARY OR AGENT
	by _____ PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY County/Office No. OR Dealer No. OR AND: Notary Expiration Date 9/10/08

**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:  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) Georgine Rossen	BLDG PERMIT OFFICE/PHONE # Skagit County Planning & Development 360-330-9410	BLDG PERMIT # 94-1378
SIGNATURE / POSITION <i>[Signature]</i> Permit Technician		DATE 8/18/2009

**MANUFACTURED HOME - FROM SECTION 1**

PLATE NUMBER 90112029	YEAR 94	MAKE F/W	LENGTH/WIDTH(FEET) 44x28	VEHICLE IDENTIFICATION NUMBER (VIN) ORFLR4818382LP
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**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	<b>NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE</b>	
	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 _____	<b>AND:</b> _____	
DEALERSHIP POSITION/AGENT/NOTARY	Notary Expiration Date	

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

The West 75 feet of the South 134 feet of the East 40 Rods of Gout lot 1, Section 1, Township 34N Rge 4E Wm lying North of the County Rd. Except that portion, if any lying within the West half of said Gout 1

**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	

**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) Kristy Lowery	COUNTY OFFICE/VFS OPERATOR NUMBER 290108
SIGNATURE Kristy Lowery	DATE 8/18/09

**10 TITLE FEES**

FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES
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**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,

