

RETURN ADDRESS



201006140182
Skagit County Auditor

6/14/2010 Page 1 of 2 2:33PM

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 +505414	YEAR 2007	MAKE MRLTE	LENGTH/WIDTH(FEET) 67 X 40	VEHICLE IDENTIFICATION NUMBER (VIN) HER0261290R
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED REAL PROPERTY TAX PARCEL NUMBER 21071

LOT 1	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE 20-87 34/03/02	QUARTER/QUARTER SECTION
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS 2	NUMBER OF LEGAL OWNERS SAME
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NAME OF REGISTERED OWNER: Phipps, Jason DOL CUSTOMER ACCOUNT NUMBER _____

NAME OF ADDITIONAL REGISTERED OWNER: Phipps, Marcy DOL CUSTOMER ACCOUNT NUMBER _____

ADDRESS 12939 Honey Ln	CITY Mt. Vernon	STATE WA	ZIP CODE 98273
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NAME OF LEGAL OWNER: SAME DOL CUSTOMER ACCOUNT NUMBER _____

NAME OF ADDITIONAL LEGAL OWNER: DOL CUSTOMER ACCOUNT NUMBER _____

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: *[Signature]*

NOTARY SEAL OR STAMP

NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE

State of Washington County of Skagit Signed or attested before me on 5/7/10

by Jason Phipps PRINT NAME OF REGISTERED OWNER Signature NOTARY OR AGENT

by Marcy Phipps PRINT NAME OF REGISTERED OWNER PRINTED NAME OF NOTARY

Title Agent AND: County/Office No. OR 290133 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: 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) Cindy Gauthier	BLDG PERMIT OFFICE/PHONE # 360-336-9410	BLDG PERMIT # BP07-0662
SIGNATURE / POSITION Cindy Gauthier	DATE 6-4-2010	

Skagit County Planning & Development

MANUFACTURED HOME - FROM SECTION 1				
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)
4505414	2007	MRLTE	67 X 40	HER026129 OR

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)

(DK 12 DT A) LOT 1 OF SKAGIT COUNTY SHORT PLAT NUMBER 20-87
 RECORDED UNDER AUDITOR'S FILE NUMBER 8902140026 BEING A PORTION
 OF THE SOUTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION
 2 TOWNSHIP 34 RANGE 3 AND ALSO KNOWN AS LOT B OF
 REVISED SKAGIT COUNTY SHORT PLAT NUMBER 10-76

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) Airsty Lowery	COUNTY OFFICE/VEH OPERATOR NUMBER 090108
SIGNATURE Airsty Lowery	DATE 6/14/10

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) 664-8895.



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