



201103110094  
Skagit County Auditor

RETURN ADDRESS

GOLF ESCROW CORP  
6100 219TH ST SW, #440  
MOUNTLAKE TERRACE, WA 98043

3/11/2011 Page 1 of 3 3:50PM

#20101373

WASHINGTON STATE DEPARTMENT OF LICENSING		Manufactured Home Application		PLEASE CHECK ONE	
<input checked="" type="checkbox"/> TITLE ELIMINATION <input type="checkbox"/> TRANSFER IN LOCATION <input type="checkbox"/> 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)			
<b>1 MANUFACTURED HOME</b>		<b>GUARDIAN NORTHWEST TITLE CO.</b>			
TPO / PLATE NUMBER +196585	YEAR 2000	MAKE SKYLN	LENGTH/WIDTH(FEET) 44 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 21910757M	
<b>2 LAND</b>		<b>LEGAL DESCRIPTION ON PAGE _____</b>			
MANUFACTURED HOME WILL BE		<input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED		REAL PROPERTY TAX PARCEL NUMBER 350533-4-009-0305	
LOT Tract A	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE SP #96-099		QUARTER/QUARTER SECTION	
<b>3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)</b>		<b>ADDITIONAL NAMES ON PAGE _____</b>			
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	1		1		
NAME OF REGISTERED OWNER Trena M. Tinkham		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL REGISTERED OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS 26821 Paramount Lane		CITY Sedro Woolley	STATE WA	ZIP CODE 98284	
NAME OF LEGAL OWNER Sterling Savings Bank		DOL CUSTOMER ACCOUNT NUMBER			
NAME OF ADDITIONAL LEGAL OWNER		DOL CUSTOMER ACCOUNT NUMBER			
ADDRESS P.O. Box 5010		CITY Lynnwood	STATE WA	ZIP CODE 98046	
<b>GRANTEE</b>					
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>Trena Michelle Tinkham</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE			
		State of Washington		Signed or attested before me on 12/17/10	
		County of Snohomish			
		by Trena M. Tinkham		Signature <i>[Signature]</i>	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
by		SHANNON L. OCHOA		PRINTED NAME OF NOTARY	
Title Notary		AND: County/Office No. OR 6/29/14		Dealer No. OR	
DEALERSHIP POSITION/AGENT/NOTARY		Notary Expiration Date			
<b>4 TITLE COMPANY CERTIFICATION</b>					
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.					
<b>5 BUILDING PERMIT OFFICE CERTIFICATION</b>					
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 # 360 336 9410		BLDG PERMIT #	
<i>[Signature]</i>		Skagit County Planning		BP 10-0438	
SIGNATURE / POSITION		PERMIT TECH		DATE 3/11/11	
LORE ANDERSON					

<b>MANUFACTURED HOME - FROM SECTION 1</b>						
TPO / PLATE NUMBER +196585	YEAR 2000	MAKE SKYLN	LENGTH/WIDTH(FEET) 44 X 28	VEHICLE IDENTIFICATION NUMBER (VIN) 21910757M		
<b>6 SIGNATURE OF LEGAL OWNER</b>						
SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.						
Signature of Legal Owner and Title, IF APPLICABLE <u>Debbie Steck, SVP</u>						
Signature of Additional Legal Owner and Title, IF APPLICABLE <u>Sterling Savings Bank</u>						
NOTARY SEAL OR STAMP		NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE				
		State of Washington	County of <u>Snohomish</u>	Signed or attested before me on <u>3/10/11</u>		
		PRINT NAME OF LEGAL OWNER <u>Debbie Steck, SVP</u>		Signature <u>[Signature]</u>	NOTARY OR AGENT	
		PRINT NAME OF LEGAL OWNER <u>Sterling Savings Bank</u>		<b>SHANNON L. OCHOA</b>		
		Title <u>Notary</u>		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>6/29/11</u>		
<b>7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)</b>						
See attached legal description <u>See Attached</u>						
<b>8 DEALER'S REPORT OF SALE</b>						
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) <u>Coach Corral, Inc.</u>		WA DEALER NUMBER <u>4278</u>	DATE OF SALE <u>12/23/2010</u>			
PURCHASE PRICE <u>\$36,900.00</u>	TAX JURISDICTION/TAX RATE <u>Skagit 8.2%</u>	DEALER'S AUTHORIZED SIGNATURE <u>CR Padgett</u>				
<input type="checkbox"/> USE TAX EXEMPT Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).						
<b>9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)</b>						
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) <u>Husty Lowery</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>290108</u>			
SIGNATURE <u>[Signature]</u>			DATE <u>3/11/11</u>			
<b>10 TITLE FEES</b>						
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX	SUBAGENT FEES	
					TOTAL FEES & TAX	
<p><b>IMPORTANT:</b> 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.</p> <p><b>APPLICANTS:</b> 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.</p> <p>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.</p>						

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.



201103110094  
Skagit County Auditor



# MANUFACTURED HOME APPLICATION ADDITIONAL ATTACHMENT

## Legal Description of Land

Use this form when a legal description from the county is not legible, and/or a statutory warranty deed is not available, to provide the legal description of the land. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- Title Elimination
- Removal From Real Property
- Transfer In Location

+ 196585

LAND:

PROPERTY TAX PARCEL NUMBER:

350533-4-009-0305

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:

Tract "A", Short Plat No. 96-099, approved December 16, 1996, and recorded January 6, 1997, under Auditor's File No. 970106001, in Volume 12 of Short Plats, pages 175 and 176, being a portion of the Southwest 1/4 of the Southeast 1/4 and the Southeast 1/4 of the Southeast 1/4 of Section 33, Township 35 North, Range 5 East, W.M..

TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over and across that certain 60 foot private road designated as Kretz Lane on the face of said Short Plat.



201103110094  
Skagit County Auditor