

4/28/2011 Page

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RETURN ADDRESS North Coast Cred	it Union							
1100 Dupont Stre				-				
Bellingham, WA 9	•			-				
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Bii 40 940012	<u> </u>		13602	7-SE		DIEASE	CHECK OI	KA
WASHINGTON STATE DE LICENS Anyone who knowing of a felony, and upor	SING gly makes a fal	se statement of a	cation material fact is	guilty	☑TITLE ☐TRAN	ELIMINATI SFER IN LO VAL FROM	ON	
1 MANUFACTURE		<u> </u>		,		· · · · · · · · · · · · · · · · · · ·		
TPO / PLATE NUMBER		a pat 17 May 1	GTH/WIDTH(FEET)	1		NUMBER (VIN)		
TPO	2011	SKYLINE 60		2F91-0				
2 LAND					ROPERTY TAX	PARCEL NUMBE	<u> </u>	
MANUFACTURED HO	OME WILL BE	AFFIXED □		P126		402100302		
LOT 3	.ock	PLAT NAME OR SEC				QUARTER/QUAF	TER SECTION	
3 GRANTOR(S) RE	GISTERED/I =	GAL OWNER(S)		N/4E	NAMES ON	PAGE _		
COUNTY NUMBER		NUMBER OF HE	GISTERED OWNERS		NUMBER	OF LEGAL OW	VERS	
	***	2 (tw	ō)		1	(one)		
NAME ÖF REGISTERED OW Steven J. Summo							TOMER ACCOUNT かとらう 5	
NAME OF ADDITIONAL REG		- // ,	and the state of t			DOL CUS	TOMERI ACCOUN	IT NUMBE
Elsie M. Summe	rs						EEM 5	45P
лорнеss 22450 Grip Road			CITY Sedro We	oolley		STATE WA 9	ZIP CODE 8284	
NAME OF LEGAL OWNER		1	"	A.		DOL CUS	TOMER ACCOUN	IT NUMBE
North Coast Cred			**************************************	<u> </u>				
NAME OF ADDITIONAL LEG	AL OWNER		and the second s			DOL CUS	TÖMER ACCOUN	IT NUMBE
ADDRESS 1100 Dupont Stre			cny Bellingha	4		STATE WA 9	ZIP CODE	
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NAME				7 8				
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Signature of Additiona		mer and Title, IF AF		N EOR DI	C Y Y	OWNERS	SIGNATUR	
		of Washington	CIA I	M FOR RI	The Manager	rattested	4 AA	·/
	l by <u>.</u>	County of <u>\</u> Steven J. S.	mners +	s		ing merby _	Wile	//
	by =	RINT NAME OF REGISTI	., 50	ИС.YS —— F	PRINTED NAME	OF NOTAFY County/Office	Milse No OB	
	Title	No la lu EALERSHIP POSITION	AGENT/NOTARY		_ AND:	Dealer Notary Expirati	No. OR 0 /70	3-20/
TITLE COMPANY						The same of the	Salaman Salah Sala	d'a
CERTIFY THAT THE LEGAL OF		e land and ownersh	•		ne real prop /PHONE NUM			
SIGNATURE / POSITION							DATE	
Finalize this applicat			n 10 calendar d	ays of the	date Title	Company Re	presentativ	signs.
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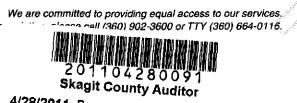
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I.n#	4894	ሰሰ	12

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SIGNATURE	OF LEGA	L OWNER I	DICATES CONS	ENT FOR E	LIMINAT	ON OF TITLE	/ REMOVAL FE	ROM REAL PRO	PERTY.
Siç	gnature of t	Legal Owner	and Title, IF APP	LICABLE	Ula.	and L	3 Tra	1 5v	P
Signature of <i>i</i>	Additional I	Legal Owner	and Title, IF APP	LICABLE _					
NOTARY	SEALLOR ST	MP	NOTARI	ZATION/CE	RTIFICA	TION FOR LE	GAL OWNER(S	S) SIGNATURE	
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	•	RES	PRINT NAME OF LEG	BALOWNER	dit l		NOTARY OR A	AGENT	
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W. OF W	A MING	Tit	LE NOTAVI		TARY		AND: D	Office No. OR ealer No. OR piration Date	11/12
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9 DEALE	R'S REPO	RT OF SALE	<u> </u>		"The good	The second of	\		
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DEALER NAME	(TYPED OR I	PRINTED)	AS BEEN COLLE	CIED.		WA DEALE	A NUMBER	DATE OF SALE	
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PURCHASE PR		TAX JURIS	DICTION/TAX BATE	DEALER'S AL		signature _ alge	\mathcal{M}		
			to a Certified Tri					d statement of	delivery).
			ENSING OFFICE					J	
		 application ding of this fo 	appears to have rm.	been compl	leted cor	rectly, and the	applicant has	sufficient docum	nentation to
NAME (TYPED	OR PRINTED) \	1			COUNTY	OFFICE/VFS OPERAT	TOR NUMBER	
SIGNATURE	1,00	>4C1	Lalive	56/			<u> 29010</u>	DATE /	. /
4	rtus	lud,	lue	<u>u/</u>			Statement of the	4/28	[11
10 TITLE F		APPLICATION	MOBILE HO	ME EEE	ELIMINAT	ION EEE	USE TAX	SUBAGENT	FEEE
TILINGTEE		AFF EIGAI ION	MOBILE FR	JME FEE	ECIMINA	ION FEE	USE IAX	SUBAGEIVI	#FEE8
IMPORTAN	Lic Re	ensing Offic tain proof o	cation has been ce, take your ap f the recording to pplication form,	plication fo ees paid. I	rm to th f the Re	e County Re cording Offic	ecording Office ce retains	TOTAL FEE:	S & TAX
	APPLI	i	Once recorded, Manufactured H icensing subag	ome Applic	cation, p	aying all red			
F			completing this		itle Elim	ination, Ren	noval from Rea	I Property or	15

If you need accom



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