

RETURN RECORDED DOCUMENT TO:



201110240060
Skagit County Auditor

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Manufactured Home Application

PLEASE CHECK ONE

- Title Elimination
- Transfer in Location
- Removal from Real Property

For full instructions on completing this form, see Manufactured Home Application Instructions, form TD-420-730.

1 Manufactured Home

TPO/Plate number +315146	Year 2004	Make oakwood	Length/Width (feet) 66 x 27	Vehicle identification number (VIN) G00R23N28380
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2 Land

Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property Tax parcel no. 17120	Legal description on page _____
Lot	Block	Plat name or Section/Township/Range 21 33 4	Quarter/Quarter section

3 Grantor(s) Registered/Legal Owner(s) - Additional names on page

County number	No. registered owners 2	No. legal owners 2	Grantee name (if applicable)
Name of registered owner Jerald Rindal		WA Driver license or UBI number RINDAJM672LR	
Name of additional registered owner mildred Rindal		WA Driver license or UBI number RINDAMC6675G	
Address (Address, City, State, ZIP code) 20095 English Road Mount Vernon WA 98274			
Name of legal owner SAME		WA Driver license or UBI number	
Name of additional legal owner		WA Driver license or UBI number	
Address (Address, City State, ZIP code)			

I declare under penalty of perjury under the laws of the state of Washington that I am/we are the registered owner(s) of this manufactured home and the foregoing information is true and correct.

Jerald Rindal
Signature of registered owner and title, if applicable

Mildred Rindal
Signature of additional registered owner and title, if applicable

Notarization/Certification

State of WA, County of Skagit

Signed or attested before me on 10-24-11

(Seal or stamp)

by JERALD RINDAL by MILDRED RINDAL
Print registered owner name Print registered owner name

Notary printed or stamped name

Notary signature

Title

and Dealer/County office number or notary expiration

Manufactured home TPO/Plate number (from Section 1) _____

4 Title Company Certification	
PRINT or TYPE Name of person signing	Title company name
Position	(Area code) Telephone number
I certify that the legal description of the land and ownership is true and correct according to the real property records.	
X	
Signature	Date

5 Building Permit Office Certification		
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.		
PRINT or TYPE Name of person signing	Building permit office	Building permit number
Georgine Ross	Skagit County Planning & Development	BP04-0536
Position	(Area code) Telephone number	
Permit Technician	360-336-9410	
X		
Signature	Date	
Georgine Ross	10/24/11	

6 Signature of Legal Owner(s)	
Signature of legal owner indicates consent for Elimination of Title or Removal from real property.	
X	
Signature of legal owner and title, if applicable	
X	
Signature of additional legal owner and title, if applicable	

Notarization/Certification	State of _____, County of _____
	Signed or attested before me on _____
(Seal or stamp)	by _____ by _____
	Print legal owner name
	Print legal owner name
	Notary printed or stamped name
	X Notary signature
	Title
	and Dealer/county office number or notary expiration

7 Land Description
Legal description of land
9.96 ac Including manufactured home 2004 oakwood Winslow 66x27 Serial number G00R23N28380 lot 1 of Skagit county Short Plat PL-00-0501 Recorded under Auditor's File Number 200104240122 being a portion of the northwest Quarter

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Manufactured home TPO/Plate number (from Section 1) _____

8 Dealer Report of Sale – Selling dealer complete this section					
PRINT or TYPE Dealer name				WA dealer number	
Date of sale	Purchase price		Tax jurisdiction/Tax rate		
<input type="checkbox"/> Sales Tax Exempt – Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
I certify that this information is correct. The manufactured home is clear of encumbrances except as shown. Any required sales tax has been collected.					
X Dealer authorized signature					
9 County Auditor/Agent Licensing Office Approval (not for use by subagents)					
PRINT or TYPE Name YOUA VANG			County office/VFS operator number 2901/25		
I certify that the above application appears to be completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.					
X Signature _____ Date 2901/25 10-24-11					
10 Title Fees					
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees
					Total fees & tax 0.00

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 46.12.750



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