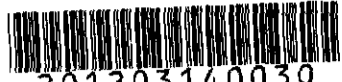


RETURN ADDRESS

DOUGLAS EAGLE
403 BAKER ST.
BELLINGHAM, WA 98225



201203140030
 Skagit County Auditor

3/14/2012 Page 1 of 6 10:40AM

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 <u>4659 290</u>	YEAR <u>1994</u>	MAKE <u>LIBERTY</u>	LENGTH/WIDTH(FEET) <u>66X28</u>	VEHICLE IDENTIFICATION NUMBER (VIN) <u>09L27969XU</u>
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2 LAND LEGAL DESCRIPTION ON PAGE _____

MANUFACTURED HOME WILL BE AFFIXED REMOVED

REAL PROPERTY TAX PARCEL NUMBER
964228

LOT <u>156</u>	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE <u>COARGROVE ONE SKAGIT</u>	QUARTER/QUARTER SECTION
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3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE _____

COUNTY NUMBER	NUMBER OF REGISTERED OWNERS <u>ONE</u>	NUMBER OF LEGAL OWNERS <u>ONE</u>
---------------	---	--------------------------------------

NAME OF REGISTERED OWNER
DOUGLAS ERIC EAGLE SR

NAME OF ADDITIONAL REGISTERED OWNER

ADDRESS <u>403 BAKER ST.</u>	CITY <u>BELLINGHAM</u>	STATE <u>WA</u>	ZIP CODE <u>98225</u>
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NAME OF LEGAL OWNER
DOUGLAS ERIC EAGLE SR

NAME OF ADDITIONAL LEGAL OWNER

ADDRESS <u>403 BAKER ST</u>	CITY <u>BELLINGHAM</u>	STATE <u>WA</u>	ZIP CODE <u>98225</u>
--------------------------------	---------------------------	--------------------	--------------------------

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: Douglas E. Eagle Sr.

Signature of Additional Registered Owner and Title, IF APPLICABLE: _____

NOTARY SEAL OR STAMP	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington County of <u>WA</u>	Signed or attested before me on <u>12/20/11</u>
	by <u>Douglas Eric Eagle Sr</u> PRINT NAME OF REGISTERED OWNER	Signature _____ NOTARY OR AGENT
	by _____ PRINT NAME OF REGISTERED OWNER	PRINTED NAME OF NOTARY <u>S KING</u> County/Office No. OR Dealer No. OR <u>20133</u> AND: 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) <u>Cindy Gauthier</u>	BLDG PERMIT OFFICE/PHONE # <u>360-336-9410</u>	BLDG PERMIT # <u>94-0404</u>
SIGNATURE / POSITION <u>Cindy Gauthier</u>	<u>Skagit County Planning & Development</u>	DATE <u>12-20-11</u>

MANUFACTURED HOME - FROM SECTION 1

TPO/PLATE NUMBER 4659290	YEAR 1994	MAKE LIBERTY	LENGTH/WIDTH(FEET) X	VEHICLE IDENTIFICATION NUMBER (VIN) 09L27
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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	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)

LOT 136, CEDAR GROVE ON THE SKAGIT

8 DEALER'S REPORT OF SALE

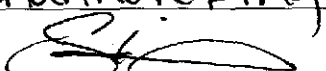
I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN. ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

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) Shannon King	COUNTY OFFICE/WFS OPERATOR NUMBER 29-01-33
SIGNATURE 	DATE 3-14-12

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) 664-8885.



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Skagit County Auditor

OWNERSHIP

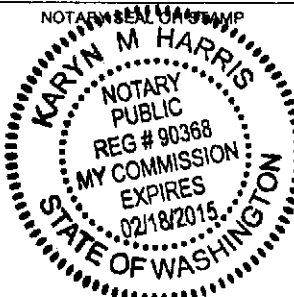
Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. This form must be recorded with the Manufactured Home Application and a certified copy presented to a vehicle licensing agency as part of the supporting documentation for a Manufactured Home application.

CHECK THE TYPE OF APPLICATION:

- Title Elimination
 Removal From Real Property
 Transfer In Location

PROPERTY TAX PARCEL NUMBER:

3877-000-1560109

ADDITIONAL GRANTOR(S) REGISTERED OWNER(S)	
NAME OF REGISTERED OWNER <i>Ronald D Glispy</i>	DOL CUSTOMER ACCOUNT NUMBER <i>+659290</i>
NAME OF REGISTERED OWNER <i>Bonnie H Glispy</i>	DOL CUSTOMER ACCOUNT NUMBER <i>+659290</i>
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
<p>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)</p> <p>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:</p>	
SIGNATURE OF REGISTERED OWNER(S)	
SIGNATURE OF REGISTERED OWNER <i>Ronald D Glispy</i>	DATE <i>3-2-12</i>
SIGNATURE OF REGISTERED OWNER <i>Bonnie H Glispy</i>	DATE <i>3-2-12</i>
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
	<p style="text-align: center;">NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE</p> <p>State of Washington Signed or attested County of <u>Whatcom</u> before me on <u>3/2/2012</u></p> <p>by <u>Ronald D. Glispy</u> Signature <u>Karyn M. Harris</u> <u>Bonnie H. Glispy</u> Notary or Agent Printed Name of Applicant</p> <p>Printed name of Notary <u>Karyn M. Harris</u> Dealer No. OR</p> <p>Title <u>Notary</u> AND: County/Office No. OR <u>2/18/2015</u> Dealership Position/Agent/Notary Notary Expiration Date</p>

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201203140030
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

LAND: PROPERTY TAX PARCEL NUMBER:

LEGAL DESCRIPTION:

LOT 156, CEDAR GROVE ON THE SKAGIT



201203140030

Skagit County Auditor

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OWNERSHIP

Use this form when there is not enough room on TD-420-729 (Manufactured Home Application) to provide the owner(s) names. 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

PROPERTY TAX PARCEL NUMBER:

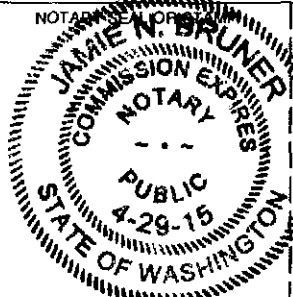
P130499-3877-000-4560109

ADDITIONAL GRANTOR(S) REGISTERED OWNER(S)	
NAME OF REGISTERED OWNER KIM L. EAGLE	DOL CUSTOMER ACCOUNT NUMBER 4659290
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER
NAME OF REGISTERED OWNER	DOL CUSTOMER ACCOUNT NUMBER

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)
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(S)

SIGNATURE OF REGISTERED OWNER <i>Kim Eagle</i>	DATE 3-12-12
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE
SIGNATURE OF REGISTERED OWNER	DATE

	NOTARIZATION / CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of Washington	Signed or attested
	County of <u>Whatcom</u>	before me on <u>March 12, 2012</u>
	Printed Name of Applicant <u>Kim Eagle</u>	Signature <u>Jamie W Bruner</u>
Printed name of Notary <u>Jamie W Bruner</u>	Notary or Agent	Dealer No. OR
Title <u>Notary Public</u>	AND: County/Office No. OR	Notary Expiration Date <u>April 29, 2015</u>
Dealership Position/Agent/Notary		

The Department of Licensing has a policy of providing equal access to its services. If you need special accomm...



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MANUFACTURED HOME APPLICATION ADDITIONAL ATTACHMENT

Legal Description of Land

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CHECK THE TYPE OF APPLICATION:

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

LAND:

PROPERTY TAX PARCEL NUMBER:

LEGAL DESCRIPTION:

LOT 156, CEDAR GROVE
ON THE SKAGIT



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Skagit County Auditor

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