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				Skagit County Auditor 8/12/2015 Page 1 of 4			4 10:59A	
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WASHINGTON STATE DEP	ATMENT OF	35 T	ifactured	_	=			<u></u>
LICENS	- Additional and	P	Application			Title E		
or full instructions on structions, form TD		g this form, s	see Manufacture	d Hom	ne Application	_	er in Loca val from R	ition leal Property
Manufacture		$\leftarrow c$			<del>.</del>			
TPO/Plate number	Year	Make	Length/Width (	feet)	Vehicle identificati	on number (V	IN)	·
\$78210	1979	KENTW	64 <b>x</b> 14		KW7095			
Land								
Manufactured home will be Affixed Remo	l l	al property	P126039		Legal descript	ion on nad	•	
1	Block	x parcel no	ame or Section/Town	shin/R			arter/Ouarter	section
Lot	Diock	'	Same of Ogdings for	ioinp/iii	nugo		anon adamoi	2001011
Grantor(s) Re	gistered/i	Legal Own	er(s) - Addition	nal nar	mes on page _			
County number	1	tered owners	No. legal owners	Gran	tee name (if applic	able)		
29 Name of registered owne	2		0			Machington	driver license	or UBI number
HICKMAN,LEA							LM261C	
Name of additional regist								or UBI number
MATHIS, JASON		·				MAT	4120	<u> 1918</u>
Address (Address, City, \$ 33657 HAMILTO			. SEDRO WOO	OLLF	Y. WA 9828	4		
Name of legal owner	OIT CEIVIE	TART RED	, septo wo	ODDI	2,7,777,70,000	confidence.	driver license	or UBI number
Name of additional legal	owner				Anna Linear	Washington	driver license	e or UBI number
	210 11				No. of Contract of		<u> </u>	
Address (Address, City S	itate, ZIP code)					Post	A	
I declare under pen	alty of perju	ry under the	laws of the state	of W	ashington that	l am/we ai	e the regis	stered
owner(s) of this ma	nufactured f	nome and th	e foregoing infor	matior	n is true and co	rrect.		
•			X	un	golden			
			Signatture <b>X</b>	e of regi Se €	istered owner and t Lattac	ntie, it applicat	ole /	
mumm.	lte.		Signature	e of add	litional registered o	wner and title,	4E	74
Notarization ACArtific	Bildly/	State of _	WA	, C	County of	<u>Kanogan</u>		
INON ESSION E	010/1	Signed or	attested before me	e on _	8.7.	<u>15                                    </u>	1/1	
STAR!	1° 50 E	ьv	TASON MAT	HIS	by		***	
The second secon		-, <del></del> -	gistered owner name	TO	Prin	egistered ov	vper name	
PUBLIC	<u>,</u> ,6₹		printed or stamped n	ame .	CTSACTO — Vetc	try signature	THUSE	
19 Jugust 5.2	WALL	<u></u>	usurance f	tgen1	and	8:/5	r/8 ce number or	notary expiration
	K.,'''.	HILE			Dea	or overly on	oo nambel 01	cary expiration

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WASHINGTON STATE DEPARTMENT OF LICENSING		actured Ho	<del>-</del>	Please check one:
		pplication		✓ Ittle Elimination ☐ Transfer in Location
or full instructions on completing structions, form TD-420-730.	g this torm, see	Manufactured Ho	me Application	Removal from Real Property
Manufactured Home	$\leftarrow +$		·	
FPO/Plate number Year 1979	Make KENTW	Length/Width (feet) 64 X 14	Vehicle identificati KW7095	on number (VIN)
Land		and the second		
	al property	126039		
Affixed ☐ Removed ☐ Tax	x parcerno. 3	e or Section/Township/I		lion on page
.ot Biock	rial Hall	a or Section Township/	nange	Guarten Guarten section
Grantor(s) Registered/L	Legal Owner	(s) – Additional na	ames on page _	
county number No. regist 29		No. legal owners Gra	stee name (if applic	able)
lame of registered owner HICKMAN,LEANNE M			<u>)</u>	Washington driver license or UBI number HICKMLM261C6
Name of additional registered owner MATHIS, JASON				Washington driver license or UBI number
Address (Address, City, State, ZIP code) 33657 HAMILTON CEME	TARY RD, S	EDRO WOOLL	EY, WA 9828	4
lame of legal owner				Washington driver license or UBI number
Name of additional legal owner				Washington driver license or UBI number
Address (Address, City State, ZIP code)			Para and a second	
declare under penalty of perjui	urv under the la	ws of the state of V	Vashington that	am/we are the registered
owner(s) of this manufactured h				
		(x) Lea	M sum	exican
			gistered owner and t	
				wner and title, if applicable
Iotarization/Certification	State of	WA	County of	Skasit
	Signed or at	tested before me on .	July	315 ,2015
• • • •	by LEAN		MAR	
Seal or stamp)	Print regist	tered owner name	<del>вение</del> пу —	registered owner name
	Y	nted or stamped name		toy eigrnature 2 2
		Agent	and	190012
	Title	<del>- 1 - 1 - 1</del>		ler county office number or notary expiration

Title Company Certific		<u> </u>			
RINT or TYPE Name of person signi	ng T	itle company name			
Positién			(Area code) Telephon	e number	
certify that the legal descripti	on of the land and ownership is	true and correct ac	cording to the rea	property records	
	X				
	Signature	•		Date	
Building Permit Office	Certification				
ceptify that				·	
the manufactured home ha	is been affixed to the real prop ssued for this purpose and the a		nected upon com	nletion	
			Building permit numb		
PRINT or TYPE Name of person sign Jeanne M U	ungst 5	K, Co.	CP04-0	004	
Permit Tech			(Areă code) Telephon ろんしーHIしー		
	X	lanen	aungst	7/29/15	
·	Signatur	·		Date	
Signature of Legal Ov	vner(s)				
	X Signatur	e of legal owner and title,	if applicable		
	X Signatus	e of additional legal owne	r and title, if applicable	<u></u>	
Notarization/Certification	State of	County of			
Total Lations Governous					
	Signed or attested before m	e on			
Seal or stamp)	by	by			
	Print legal owner name	Pri	nt legai owner name		
	Notary printed or stamped n	ame / No	tary signature		
	T.W.	and		the supported the support	
	Title		aler/county office num	ber or notary expirat	
Land Description					
egal description of land		S 1.00 1	H-7/4/	evant	
yman - Hamily	ton area, ACRE	-0907 7	Provided	nder	
county short	Plat PL-06	northon Loc	cated in	mys 2	
GENTENN IN TOU	aship 35 north	. Range (	o Easth	sm Got 2	
stagit cours	ty Short Plat	PL-060-00	102 Rec	Soul VIV	
F # 20070414	Plat PL-06  0158. Being a p  nship 35 north  ly Short Plat  20155. being a p  of section 10.	oortion Lo	TE MAC	th Jaras	
of the sely	of section 10.	10wnship			
East W.M.				N. A.	

AND AND AND	lonie IPO/Plate IIuli							
Dealer Re	port of Sale - Sell	ing dealer complete	this section					
PRINT of TYPE De		Washington dealer number						
				<u> </u>				
Date of sale	Date of sale Purchase price Tax				ax jurisdiction/Tax rate			
Sales Tax Exempt - Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).								
I certify that thi	is information is corre	ct. The manufactured	d home is clear of e	encumbrances	except as shown.			
Any required sales tax has been collected.								
▼ V								
Dealer authorized signature								
County Auditor/Agent Licensing Office Approval (not for use by subagents)								
PRINT or TYPE Name  County office/VFS operator number  29013								
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.  Skagit County Auditor Auditor Signature Date								
Title Fees								
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees			
					Total fees and tax			
	· · · · · · · · · · · · · · · · · · ·				Total fees and tax			

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. Rew 46.12.750