



Skagit County Auditor
8/14/2015 Page

1 of 4 3:52PM
\$75.00

RETURN RECORDED DOCUMENT TO:

Guardian NW Title
Po Box 1667
Manu Vernon WA 98273



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 <u>1005402</u>	Year <u>2008</u>	Make <u>VIBER</u>	Length/Width (feet) <u>60x27</u>	Vehicle identification number (VIN) <u>0AL362U8XU</u>
2 Land				
Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property Tax parcel no. <u>P130784</u> Legal description on page <u>2</u>		
Lot	Block	Plat name or Section/Township/Range <u>Sec 14, Twn 34 N, Rng 4 E</u>		Quarter/Quarter section <u>Pm SW</u>
3 Grantor(s) Registered/Legal Owner(s) - Additional names on page				
County number	No. registered owners <u>3</u>	No. legal owners <u>N/A</u>	Grantee name (if applicable)	
Name of registered owner <u>Allan B. Fredrickson</u>			WA Driver license or UBI number	
Name of additional registered owner <u>Barbara A. Fredrickson</u>			WA Driver license or UBI number	
Address (Address, City, State, ZIP code) <u>1020 CHIPPONA ST.</u>				
Name of legal owner <u>Same as Registered owner</u>			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.				
			<u>[Signature]</u> Signature of registered owner and title, if applicable	
			<u>[Signature]</u> Signature of additional registered owner and title, if applicable	
State of <u>WA</u> , County of <u>Skagit</u>				
Signed or attested before me on <u>August 14, 2015</u>				
<u>ALLAN FREDRICKSON</u> Print registered owner name <u>Tolleta Southwick</u> Notary printed or stamped name			by <u>Barbara A. Fredrickson</u> Print registered owner name <u>[Signature]</u> Notary signature	
Title			and Dealer/county office number or notary expiration	

Ownership

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

Land: Property tax parcel number:

Additional grantors registered owners	
Name of registered owner <i>Sheila D. GUNEXIUS</i>	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
Name of registered owner	DOL customer account number

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Signature of registered owners	
Signature of registered owner <i>[Signature]</i>	Date <i>8-14-15</i>
Signature of registered owner <i>[Signature]</i>	Date <i>8/14/15</i>
Signature of registered owner <i>[Signature]</i>	Date <i>8/14/15</i>
Signature of registered owner X	Date
Signature of registered owner X	Date
Signature of registered owner X	Date

	NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE	
	State of <u>WA</u>	County of <u>SKagit</u>
	Signed or attested before me on <u>AUGUST 14, 2015</u>	
	by <u>ALLAN FREDRICKSON</u> Signature <u>[Signature]</u> Printed name of applicant	Notary or Agent
by <u>Barbara Fredrickson</u> Printed name of Notary <u>Sheila Gunexius</u>	<u>Tolleta Southwick</u>	
Title _____	Dealer No. OR AND: County/Office No. OR Notary Expiration Date	

Manufactured home TPO/Plate number (from Section 1) +805402

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
 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.

PRINT or TYPE Name of person signing <u>Glennem Gungst</u>	Building permit office <u>SK Co.</u>	Building permit number <u>BP10-0415</u>
Position <u>Permit Tech</u>	(Area code) Telephone number <u>360-416-1320</u>	

X Glennem Gungst 8/14/15
Signature Date

6 Signature of Legal Owner(s)

Signature of legal owner indicates consent for Elimination of Title or Removal from real property.



X [Signature]
Signature of legal owner and title, if applicable

X Barbara A. Fredrickson
Signature of additional legal owner and title, if applicable

Notarization/Certification

State of WA, County of Skagit

Signed or attested before me on August 14, 2015

(Seal or stamp)

ALLAN FREDRICKSON
Print legal owner name

by Barbara A. Fredrickson
Print legal owner name

Tolleeta Southwick
Notary printed or stamped name

X [Signature]
Notary signature

Title _____ and Dealer/county office number or notary expiration _____

7 Land Description

Legal description of land
Lot 2 as delineated on Short Card No. PL-11-0041, as approved on October 20, 2011 and recorded on October 31, 2011 under Auditor's File No. 20110310073, records of Skagit County, Washington; being a portion of the southwest 1/4 of section 14, Township 34 North, Range 4 East W.M..

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 <i>A. Lowery</i>				County office/VES operator number <i>240108</i>	
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				<i>H. Huley</i> Date	
Skagit County Auditor 2907-08					
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 46.12.210