



RETURN RECORDED DOCUMENT TO:

Chicago Title
425 Commercial
Mount Vernon, WA 98273

Skagit County Auditor \$75.00
2/1/2016 Page 1 of 3 11:46AM

Escrow # 620026171-CM
CHICAGO TITLE

WASHINGTON STATE DEPARTMENT OF LICENSING
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

Table with 5 columns: TPO/Plate number (\$46930), Year (1979), Make (POROY), Length/Width (feet) (70 X 28), Vehicle identification number (VIN) (PS8465)

2 Land

Manufactured home will be: [X] Affixed [] Removed
Real property: []
Tax parcel no. P48155
Legal description on page 3

Table with 4 columns: Lot (2), Block, Plat name or Section/Township/Range (SCSP# 505-80), Quarter/Quarter section

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

Table with 4 columns: County number, No. registered owners, No. legal owners, Grantee name (if applicable)
Includes fields for Name of registered owner (Robert E House), Name of additional registered owner (Heather M House), Address (3077 Barrell Springs Rd, Bow, WA 98232), Name of legal owner, Name of additional legal owner, and 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.

Signature of registered owner and title, if applicable: Robert E House
Signature of additional registered owner and title, if applicable: Heather M House



State of Washington, County of Skagit
Signed or attested before me on 29th January 2016
by Robert E House, Heather M House
Print registered owner name
Notary printed or stamped name: Deanna Guiles, Title: Escrow Assistant
Notary signature: Deanna Guiles, Notary expiration: 4/4/2018
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 Cassandra Mitchell	Title company name Chicago Title	
Position Escrow Officer	(Area code) Telephone number 360-848-9241	
I certify that the legal description of the land and ownership is true and correct according to the real property records.		
X <u>C. Mitchell</u> Signature		2-1-16 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 LORI ANDERSON	Building permit office SKAGIT COUNTY	Building permit number M15-0056/M16-0004
Position PERMIT TECHNICIAN	(Area code) Telephone number (360) 416-1320	
X <u>Lori Anderson</u> Signature		2-1-16 Date

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	Print legal owner name
	Notary printed or stamped name	Notary signature
	Title	and Dealer/county office number or notary expiration

7 Land Description
Legal description of land Tract 2, Skagit County Short Plat No. 505-80, recorded July 9, 1980 under Auditor's File No. 8007090014, in Book 4 of Short Plats, Page 137, recorded of Skagit County, Washington. Situate in Skagit County, Washington.

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

8 Dealer Report of Sale – Selling dealer complete this section					
PRINT or TYPE Dealer name				Washington 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>Jane Vana</i>			County office/VFS operator number <i>2981125</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>[Signature]</i>				Date <i>2-1-16</i>	
10 Title Fees					
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees
					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. RCW 46.12.750