



201706060063

Skagit County Auditor

\$75.00

6/8/2017 Page

1 of

3 4:20PM

RETURN RECORDED DOCUMENT TO:

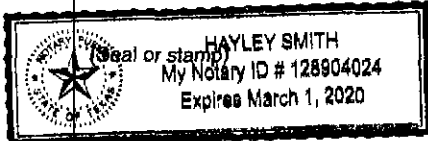
**Manufactured Home Application**

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

Please check one:

- ☒ Title Elimination
☐ Transfer In Location
☐ Removal from Real Property

1 Manufactured Home	
Title purpose only (TPO)/Plate no.	Year Make Length/Width (feet) Vehicle identification no. (VIN)
	2015 Mazda 25x 44 HCRD2973-20R-AB
2 Land	
Manufactured home will be ☒ Affixed ☐ Removed	Real property Tax parcel no. Legal description on page
	P59474
Lot 78 Block 6	Plat name or Section/Township/Range Quarter/Quarter section
	27/35/01 NE
3 Grantor(s) Registered/Legal Owner(s) - Additional names on page	
County no.	No. registered owners No. legal owners Grantee name (if applicable)
29	2 1
Name of registered owner	Washington driver license or UBI no.
Ruyle Investments 6, LLC	46-1748250
Name of additional registered owner	Washington driver license or UBI no.
4703 Devonshire Ave Anacortes	603-534-011
Address (Address, City, State, ZIP code)	
3219 Silver Crest Dr. Mill Creek WA 98012	
Name of legal owner	Washington driver license or UBI no.
Ruyle Investments 6, LLC	603-534-011
Name of additional legal owner	Washington driver license or UBI no.
Address (Address, City, State, ZIP code)	
3219 SILVER CREST DR, MILL CREEK, WA 98012	
I certify 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.	
Date and place (city or county) signed	Registered owner signature Title, if signing for a business
	X [Signature] owner RI
Date and place (city or county) signed	Registered owner signature Title, if signing for a business
	X
Notarization/Certification	
State of TX	County of Dallas
Signed or attested before me on 4-28-17	
by	by
Print registered owner name	Print registered owner name
Notary printed or stamped name	Notary signature
	03-01-2020
Title	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 no.
I certify that the legal description of the land and ownership is true and correct according to the real property records.	
☒ 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	Building permit office	Building permit no.
Don Measamer	Bld-206-1537	
Position	(Area code) Telephone no.	
Director PCED		
☒ Signature	6/5/17	
Date		

6 Signature of Legal Owner(s)

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

☒ Legal owner signature Title, if signing for a business

☒ Legal owner signature Title, if signing for a business

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 Notary signature

Title and _____ Dealer/county office number or notary expiration

7 Land Description

Legal description of land Number

skyline #6 Lot #78

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

8 Dealer Report of Sale – Selling dealer complete this section

PRINT or TYPE Dealer name <i>Heritage Home Center</i>		Washington dealer no. <i>4822</i>
Date of sale <i>3/27/17</i>	Purchase price <i>\$164,880-</i>	Tax jurisdiction/Tax rate
☐ Sales Tax Exempt – Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).		
I certify under penalty of perjury under the laws of the state of Washington that this information is correct. The manufactured home is clear of encumbrances except as shown. Any required sales tax has been collected.		
Date and place (city or county) signed	☒ 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/VFS operator no. <i>290108</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.	
☒ Signature <i>A. Lowery</i>	Date <i>6/16/17</i> <i>290108</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