

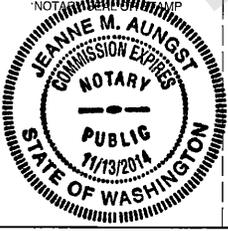
RETURN ADDRESS

Washington Federal
 300 E Fairhaven Ave
 PO Box 527
 Burlington, Wa 98233

201901140099
 01/14/2019 01:40 PM Pages: 1 of 2 Fees: \$100.00
 Skagit County Auditor

CHICAGO TITLE
 620036826

STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
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	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2003	Palm	28 X 70	PH206104	
2 LAND LEGAL DESCRIPTION ON PAGE					
MANUFACTURED HOME WILL BE <input checked="" type="checkbox"/> AFFIXED <input type="checkbox"/> REMOVED REAL PROPERTY TAX PARCEL NUMBER 4032-001-031-0005					
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
29-31	1	Thunderbird Ln			
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S) ADDITIONAL NAMES ON PAGE					
COUNTY NUMBER	NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS		
	2		2		
NAME OF REGISTERED OWNER DOL CUSTOMER ACCOUNT NUMBER					
Terry P Clifford CLIFFTP517B0					
NAME OF ADDITIONAL REGISTERED OWNER DOL CUSTOMER ACCOUNT NUMBER					
Linda L Allen ALLENLL401RJ					
ADDRESS CITY STATE ZIP CODE					
9150 Thunderbird Ln Concrete Wa 98237					
NAME OF LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER					
Washington Federal					
NAME OF ADDITIONAL LEGAL OWNER DOL CUSTOMER ACCOUNT NUMBER					
ADDRESS CITY STATE ZIP CODE					
425 Pike St Seattle Wa 98101					
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 <i>Terry P. Clifford</i>					
Signature of Additional Registered Owner and Title, IF APPLICABLE <i>Linda L. Allen</i>					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY STATE OF WASHINGTON		State of Washington County of Skagit		Signed or attested before me on 01/20/11	
DOREEN K. NYSTROM NOTARY PUBLIC EXPIRES 8/10/14		Terry P Clifford PRINT NAME OF REGISTERED OWNER		Signature <i>Doreen K Nystrom</i> NOTARY OR AGENT	
		by Linda L Allen PRINT NAME OF REGISTERED OWNER		Doreen K Nystrom PRINTED NAME OF NOTARY	
		Title Notary DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR 03/10/14 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			
Jessica Bowling		Chicago Title 360.445.7033			
SIGNATURE / POSITION <i>Jess Bowling</i> escrow		DATE 12/31/18			
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: <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.					
NAME (TYPED OR PRINTED)		BLDG PERMIT OFFICE PHONE #		BLDG PERMIT #	
Georgine Rosson		360-330-7410		BP10-0598	
SIGNATURE / POSITION <i>Georgine Rosson</i> Permit Technician		DATE 12/1/11			

MANUFACTURED HOME - FROM SECTION 1						
TPO/PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)		
	2003	Palm	70 X 27	PH206104		
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 <u>Doreen Nystrom, AVP/Manager</u> Washington Federal						
Signature of Additional Legal Owner and Title, IF APPLICABLE _____						
NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE-						
		State of Washington County of <u>Skagit</u> Signed or attested before me on <u>1/20/19</u>				
		by <u>Washington Federal</u> PRINT NAME OF LEGAL OWNER		Signature <u>Jeanne M Aungst</u> NOTARY OR AGENT		
		by <u>Doreen Nystrom, AVP/Manager</u> PRINT NAME OF LEGAL OWNER		PRINTED NAME OF NOTARY <u>Jeanne M Aungst</u>		
		Title <u>Notary</u> DEALERSHIP POSITION/AGENT/NOTARY		AND: County/Office No. OR Dealer No. OR Notary Expiration Date <u>11/13/14</u>		
7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's Office)						
Lots 29, 30 and 31, Block 1, "Thunderbird Lane," as per plat recorded in Volume 8 of Plats, pages 76 and 77, records of Skagit County, Washington. Situate in the County of Skagit, State of Washington.						
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				
<input type="checkbox"/> 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) <u>Flower</u>			COUNTY OFFICE/VFS OPERATOR NUMBER <u>290108</u>			
SIGNATURE <u>Flower</u>			DATE <u>1/14/19</u>			
10 TITLE FEES						
FILING FEE	APPLICATION	MOBILE HOME FEE	ELIMINATION FEE	USE TAX		
				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.						
<div style="border: 1px solid black; padding: 5px;"> 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. </div>						
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.