# 201902070060 02/07/2019 02:31 PM Pages: 1 of 5 Fees: \$103.00

| RETURN RECORDED DOCUME   | NT TO:                   | Skagit Co                 | ounty Auditor                                   |
|--|--------------------------|---------------------------|---|
| KTIN: ULISICA  | Stalder                  |                           |   |
| Chicago Title Company  |                          |                           |   |
| 425 Commercial St  |                          |                           |   |
| Mount Vernon, WA 98273   |                          |                           |   |
| 620032112  |                          |                           |   |
| 420020112  |                          | ·····                     |   |
|  |                          |                           |   |
| WASHINGTON STATE DEPARTMENT OF                                 |                          | ured Home<br>cation       | Please check one:  ☑ Title Elimination          |
| or full instructions on comple                                 | • •                      | Transfer in Location      |   |
| application Instructions, for                                  | m TD-420-730.            | diactarea monie           | Removal from Real Property                      |
| Manufactured Home  |                          |                           | PH1+3100 R18 - 12695A                           |
| Title purpose only (TPO)/Plate no.                             | Year Make                | Length/Width (feet)       | Vehicle Identification no. (VIN)                |
|  | 2018                     | 52 x 27                   | 31 04G285221                                    |
| 2 Land Manufactured home will be                               | Real property            |                           |   |
| Affixed Removed  | Tax parcel no. P66254    | 4 Leg                     | al description on page Exhibit A attache        |
| Lot Block  | Plat name or Se          | ection/Township/Range     | Quarter/Quarter section                         |
| E  |                          |                           | KIKET VIEW                                      |
| Grantor(s) Registere County no. No. re                         |                          |                           | on page   |
| ounty no.  | 2                        |                           |   |
| Name of registered owner                                       |                          |                           | Washington driver license or UBI no.            |
| Jeffrey R Bedford  |                          |                           | A 0888 047 Washington driver license or UBI no. |
| Name of additional registered owner<br>Theresa M Bedford       |                          |                           | N9814817  |
| Address (Address, City, State, ZIP of                          | ode)                     | <del></del>               | N481-1011                                       |
| 800 Morningside Dr, Fol  |                          |                           |   |
| Name of legal owner  |                          |                           | Washington driver license or UBI no.            |
| Washington Federal   |                          | · ·                       | Washington driver license or UBI no.            |
| Name of additional legal owner                                 |                          |                           | yyashingtan differ license of dan no.           |
| Address (Address, City State, ZIP co                           | ode)                     |                           |   |
| 425 Pike St, Seattle, WA                                       | 98101                    |                           |   |
| I certify under penalty of per<br>owner(s) of this manufacture | jury under the laws of t | he state of Washing       | gton that I am/we are the registered            |
| 10 ~6 ~17  | on nome and the lorego   |                           | 100 12 - In the second second                   |
| Date and place (city or county) signs                          | od Ber                   | gistered owner elementure | Title, if signing for a business                |
| 10-6-17 500  | comento X                | gistered owner signature  | is III gesterd                                  |
| Date and place (city or county) signe                          | Reg                      | gistered owner signature  | Title, if signing for a business                |
| Notarization/Certification                                     | State of                 | , Count                   | y of  |
|  | Signed or attested       | before me on              |   |
| (Seal or stamp)  | by                       | _                         | by  |
| (Opar or stamp)  | Print registered o       | owner name                | by Print registered owner name                  |
|  | Notary printed or        | stamped name              | Notary signature                                |
|  | Title                    | /                         | and   |
| D 400 700 (D/0/46)\\\ Pere 1 of 3                              | LING                     |                           | Continued on next page                          |

### S 2009-2015 Hotery Learning Contact - All Polytic Reserved moneralizations. There is old down on mort and aid in section essenting assum? endulentalen vien. Dentstempten den eten dien eien eten eten den besche unter die en eten eine kontenten einsche Franzische , softward (3) Describer. 3 TP.C ON bestsb bns , sageq 2 mo lismuoj ynston ni balkatab zi snava Isinatoly MANU ENCTURED HOME APRICATION (29)222500 O rediffication O credible witness(c2) sometive yndacksiss to assed ant no orn or bevor? The certificate is attached to a document tifled/for the purpose of moissiffinebi insilta to bortisM Description of Attached Document Institution beforette ed no gravier ancered of taleau evoring year bras frammoob beginnflueriu ne of farul eith Authorities has becomen treathless it is not because it was to be a notice of the information of the interest - NOTTAMPORNI JANOTT90 For other required interession (Notary Name, Commission Mo. stc.) 1892 Santa Clara County My Comm. Expires Oct. 31, 2018 LAURA J. ROSE-BURON COMM. #2087737 Notary Public - California satisfactory evidence to be the person(s) who appeared before me. THERESH M. BEDFORD , proved to me on the basis of JEFFACY R. SED FORD pue sint no em ended (bennifin to) of mows and sands County of Sychemical D State of California document to which this certificate is altached, and not the trutriulmess, accuracy, or validity of that document. A notisity public or other officer completing this cardificate ventiles only the identity of the individual who signed the California Jurat Certificate ር የመጽጀመመን ነጋር የተሸመሙ የመንጀር ተነም መመጀር ተመጀመ የመስከተም እን ተመቀረ የመንጀር ተመቀረ መንጀር የመንጀር የመንጀር

## PHH3100P18-12595A Section 1) 3104928522A

| - " | Wandractured nome (PO/Plate number (Iron Secuoli 1)  |  |  |  |  |  |  |  |  |  |
|-----|--|--|--|--|--|--|--|--|--|--|
|     | Title Company Certification  |  |  |  |  |  |  |  |  |  |
| Γ   | PRINT or TYPE Name of person signing Title company name  |  |  |  |  |  |  |  |  |  |
|     | Chicago Title Company  |  |  |  |  |  |  |  |  |  |
|     | Position (Area code) Telephone no.   |  |  |  |  |  |  |  |  |  |
|     | ESCYOW (360) 424-1700  |  |  |  |  |  |  |  |  |  |
| ŀ   |  |  |  |  |  |  |  |  |  |  |
| - 1 | I certify that the legal description of the land and ownership is true and correct according to the real property records.   |  |  |  |  |  |  |  |  |  |
|     | 1/15/2019  |  |  |  |  |  |  |  |  |  |
| ĺ   | x (1) (1) (1) (1) (1) (1)  |  |  |  |  |  |  |  |  |  |
|     | Signefure Date   |  |  |  |  |  |  |  |  |  |
|     | 5 Building Permit Office Certification   |  |  |  |  |  |  |  |  |  |
| _   |  |  |  |  |  |  |  |  |  |  |
|     | I certify that   |  |  |  |  |  |  |  |  |  |
|     | Ithe manufactured home has been affixed to the real property as described.   |  |  |  |  |  |  |  |  |  |
| Į   | $\square$ a building permit has been issued for this purpose and the attachment will be inspected upon completion.   |  |  |  |  |  |  |  |  |  |
| - 1 | PRINT or TYPE Name of person signing Building permit office Building permit no. Assistance of person signing Building permit no.   |  |  |  |  |  |  |  |  |  |
| - 1 | Tara Satushak Swinomish Dummin XIXI  |  |  |  |  |  |  |  |  |  |
| -   | Position (Area code) Telephone no.   |  |  |  |  |  |  |  |  |  |
| ı   | Senio- Planne- 360 466 5318  |  |  |  |  |  |  |  |  |  |
| ı   |  |  |  |  |  |  |  |  |  |  |
|     | X Jan Joseph 02-06-2019  |  |  |  |  |  |  |  |  |  |
| ŀ   | Signature Date   |  |  |  |  |  |  |  |  |  |
|     | 2 Cimpton (1) and Owned (1)  |  |  |  |  |  |  |  |  |  |
|     | 6 Signature of Legal Owner(s)  |  |  |  |  |  |  |  |  |  |
| ľ   | Signature of legal owner indicates consent for Elimination of Title or Removal from real property.   |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |
|     | x Woullash verbinar  |  |  |  |  |  |  |  |  |  |
|     | Legal owner signature Title, if signing for a business   |  |  |  |  |  |  |  |  |  |
|     | Y O  |  |  |  |  |  |  |  |  |  |
| - 1 | Legal owner signature Title, it signing for a business   |  |  |  |  |  |  |  |  |  |
| -   |  |  |  |  |  |  |  |  |  |  |
|     | Notarization/Certification State of WA County of SKAgit  |  |  |  |  |  |  |  |  |  |
| 23  | Signed or attested before me on 1-14-2019  |  |  |  |  |  |  |  |  |  |
|     | Solica of Medicine and Market Property of Allested  |  |  |  |  |  |  |  |  |  |
|     | VSOUT OF BLAND UBLIC & by MYRUN NYSTY ON by  |  |  |  |  |  |  |  |  |  |
| _   | Print legal owner name Print legal owner name  |  |  |  |  |  |  |  |  |  |
| ಿ   | TATE OF WASHINGTON A JESSICA STALACY AUTOMOTION TO THE STALACY AUTOMOTION OF THE STALACY AUTOMOT |  |  |  |  |  |  |  |  |  |
| ٩   | COMMISSION EXPIRES Notary printed or stamped name Notary grinted or stamped name Notary and 15 6-29-19   |  |  |  |  |  |  |  |  |  |
|     | MAY 29, 2019 Dealer/county office number or notary expiration  |  |  |  |  |  |  |  |  |  |
| Bri |  |  |  |  |  |  |  |  |  |  |
| _   | 7 Land Description   |  |  |  |  |  |  |  |  |  |
|     | Legal description of land  |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |
|     | Lot E Kiket View. Full legal description attached hereto   |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |
|     | Strattached & Mibit A  |  |  |  |  |  |  |  |  |  |
|     | O O O O O O O O O O O O O O O O O O O  |  |  |  |  |  |  |  |  |  |
|     | 180-1 18005 04100  |  |  |  |  |  |  |  |  |  |
|     | Legal description  |  |  |  |  |  |  |  |  |  |
|     | 3  |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |
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|     |  |  |  |  |  |  |  |  |  |  |
|     |  |  |  |  |  |  |  |  |  |  |

TD-420-729 (R/8/16)WA Page 2 of 3

Continued on next page



## PH1+3100R18-1259GA 310492852ZA

| Manufactured no   | ome i PO/Piate ni   | imber (trom Section )      | )                    |                          |                    |  |  |  |  |  |
|---|---|----------------------------|----------------------|--------------------------|--------------------|--|--|--|--|--|
| 8 Dealer Rep  | ort of Sale - S   | elling dealer complete     | this section         |                          |                    |  |  |  |  |  |
| PRINT OF TYPE Dea   | Direct (  | of Washin                  | gton                 | Washington dealer $4953$ | no.                |  |  |  |  |  |
| 01.12.20  |   | rchase price<br>114,100.00 | Tax jurisi           | diction/Tax rate         |                    |  |  |  |  |  |
| Sales Tax Ex  | Sales Tax Exempt – Sale to a Certified Tribal member on the reservation (attach notarized statement of deliver 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 pequired sales tax has been collected. |                            |                      |                          |                    |  |  |  |  |  |
| I certify under po<br>manufactured he                                     |   |                            |                      |                          |                    |  |  |  |  |  |
| 1.15.201<br>Date and place (city  | Date and place (city or county) signed  Dealer authorized signature   |                            |                      |                          |                    |  |  |  |  |  |
| County Auditor/Agent Licensing Office Approval (not for use by subagents) |   |                            |                      |                          |                    |  |  |  |  |  |
| PRINT or TYPE Nam   | Youal   | lang                       | County office/VFS of | perator no.              | PVIR               |  |  |  |  |  |
| I certify that the  | 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 Date  |   |                            |                      |                          |                    |  |  |  |  |  |
| 10 Title Fees   |   |                            |                      |                          |                    |  |  |  |  |  |
| Filing fee  | Application   | Mobile home fee            | Elimination fee      | Úse 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

TD-420-729 (F/8/16)WA Page 3 of 3

#### **EXHIBIT "A"**

Order No.: 620032112

For APN/Parcel ID(s): P66254 / 3935-000-005-0009

#### PARCEL A:

Tract E, ASSESSOR'S PLAT OF KIKET VIEW, according to the plat thereof recorded in Volume 9 of Plats, page 95, records of Skagit County, Washington.

Situated in Skagit County, Washington

#### PARCEL B:

An undivided one-sixth interest in Tract C, ASSESSOR'S PLAT OF KIKET VIEW, according to the plat thereof recorded in Volume 9 of Plats, page 95, records of Skagit County, Washington.

Situated in Skagit County, Washington

#### PARCEL C:

A non-exclusive easement for access for and purposes to the above described tracts, being 25 feet in width, and specifically described as follows:

Beginning at the point of intersection of the South line of said North 150 feet of the South 750.32 feet of Government Lot 2 with the East line of Government Lot 2;

Thence North 88°34'00" West along said South line a distance of 30.00 feet to a point on the West right of way line of the County Road along the East line of said Government Lot 2, which point is the true point of beginning of this easement description;

Thence North 88°34'00" West along said South line of the North 150 feet of the South 750.32 feet of Government Lot 2, a distance of 908.00 feet;

Thence North 0°35'30" East, a distance of 25.00 feet;

Thence South 88°34'00" East, a distance of 718.00 feet, to a point on the West right of way line of said County Road along the East line of Government Lot 2;

Thence South 0°35'30" West along the West right of way line of said County Road, a distance of 25.00 feet to the true point of beginning of this easement description.

Situated in Skagit County, Washington