## 202011120040

11/12/2020 08:56 AM Pages: 1 of 4 Fees: \$156.50 Skagit County Auditor

| Document Title: Title Elimination  |
|--|
| Reference Number:  |
| Grantor(s):  [_] additional grantor names on page  1. King Family Trust  |
| 1. King Family Trust 2. Hichael King 3. Astrid M. King   |
| Grantee(s): [] additional grantee names on page  1. Washington State   |
| 2.   |
| Abbreviated legal description: [_] full legal on page(s)  SE SW 19-33-05   |
| Assessor Parcel / Tax ID Number: [_] additional tax parcel number(s) on page   |
| I, Toriginal document. Recording fee is \$103.50 for the first page, \$1.00 per page thereafter per document. In addition to the standard fee, an emergency recording fee of \$50.00 is assessed. This statement is to become part of the recorded document. |
| Signed 0/m Dated 11/12/20  |

## RETURN RECORDED DOCUMENT TO:

| WASHINGTON STATE DEPARTMENT OF LICENSING   |              |               | Manufa<br>Ap               | cture<br>plicat |  |                     | lease check one:<br>Title Elimination     |        |
|--|--------------|---------------|----------------------------|-----------------|--|---------------------|---|--------|
| For full instructions on completing this form, see Manufactured Home Transfer in Location                                    |              |               |                            |                 |  |                     |   |        |
| Application Instructi  |              |               | 30.                        |                 |  |                     | Removal from Real Property                |        |
| 1 Manufacture  |              |               | NA-1                       | Lanath          | MANIGHT Maga                               | Vehiele identific   | estion no (MNI)                           |        |
| 1 1 1 1  |              | Year<br>1996  | Make<br>Mduln              | 60              | Width (feet) Vehicle identification 115732 |                     | ation no. (Vin)                           |        |
| 2 Land   |              | 1330          | 1,144111                   | 1.50            | A  | 1                   |   |        |
| Manufactured home will be Real property  |              |               |                            |                 |  |                     |   |        |
| ☑ Affixed ☐ Removed Tax parcel no. 18158 Legal description on page See #7  |              |               |                            |                 |  |                     |   |        |
| Lot<br>5   | Block        |               | Plat name or S<br>S19 T33N |                 |  |                     | Quarter/Quarter section<br>SE1/4 of SW1/4 |        |
| Manufactured home ph   |              |               |                            |                 |  |                     | Is location mobile home park?             |        |
| 21802 Sta  | te Ro        | ute 9         | mount                      | Vern            | on wa                                      | 98274               | ☐Yes ☑ No                                 |        |
| 3 Grantor(s) R   |              |               |                            |                 |  |                     |   |        |
| County no.   | i            | registered ow | ners No. lega              | al owners       | Grantee na                                 | ame (if applicable) |   |        |
| 29   | 1            |               |                            |                 |  |                     |   |        |
| Name of registered own   |              | ****          |                            |                 |  |                     | Washington driver license or UBI no.      |        |
| THE KING FAN   |              |               |                            |                 |  |                     | KING*MD530BR                              |        |
| Name of additional regi  | stered owne  | er            |                            | of              | survivorship r                             | int tenants w/right | I - I                                     |        |
| A-1.1  | 01-1- 710    |               |                            | (J              | TWROS)                                     | _Yes ∐ No           | WDL74373463B                              |        |
| Address (Address, City, 21802 STATE R  |              | •             | L AEBNON                   | WA 982          | 74   |                     |   |        |
| Name of legal owner  | 0011.5       | MOON          | VERNON                     | VV A 302        | ./ <del>'1</del>                           |                     | Washington driver license or UBI no.      |        |
| wasnington driver license of obt no.   |              |               |                            |                 |  |                     |   |        |
| Name of additional legal owner Washington driver license or UBI no.  |              |               |                            |                 |  |                     | Washington driver license or UBI no.      |        |
| Address (Address, City   | State, ZIP o | code)         |                            |                 |  |                     |   |        |
| I certify under pen<br>owner(s) of this m  |              |               |                            |                 |  |                     | we are the registered                     |        |
| 10/30/2020 Kaik  | ua-Kona      | Countrel      | thure X                    | TIMO            | 110  |                     | lessee                                    |        |
| Date and place (city or  |              |               | A Hayara Heg               | SUN.            | ner signature                              | ing The             | wotee, if signing for a business          | 11111  |
| Date and place (city or  |              |               |                            |                 | er signature                               | 100                 | Title, if signing for a business N        | H. ROS |
| Notarization/Certifi   | cation       | Sta           | te of Hawa                 |                 |  | 101 Havai           | III We                                    |        |
|  | LII.         |               |                            |                 | Ral  |                     | 473 320                                   | ARY    |
| WIELANIE ANIE  | H. Parly     |               | ned or attested            |                 |  | THE SU, E           | PUE                                       | BLIC : |
| (Seal or Starrin). Thu ITO MUST RIVE IN INC.   |              |               |                            |                 |  |                     |   | r No.  |
| Print registered Makantich Ross Print registered owner name 06-65  |              |               |                            |                 |  |                     |   |        |
| PUBLIC: Notary printed or stamped some   |              |               |                            |                 |  |                     |   |        |
| in the commission expires: and 06/28/2023  |              |               |                            |                 |  |                     |   |        |
| Comm   |              |               |                            |                 |  |                     | ounty office number or notary expiration  |        |
| TD-420-725 APVB 20) WA Page 1 of 3 Doc Date: 10/30/2020 # Pages: 2 Continued on next page  Notary Name: Marie # Poge Circuit |              |               |                            |                 |  |                     |   |        |
| Dog, Description: Manfalred (Stamp or Seal)  Home application (Michael & King & astrold M. King                              |              |               |                            |                 |  |                     |   |        |
| 10/30/2020 V Notice of 10/30/2020  |              |               |                            |                 |  |                     |   |        |
|  |              |               | Notary Signat              | ure             | Date                                       | -070                |   |        |
|  |              |               |                            |                 |  |                     |   |        |

| Manufactured home TPO/Plate or Vehicle Ider   | Triffication (VIN) number       | 1-15732   |
|---|---------------------------------|---|
| 4 Title Company Certification   | T-11                            |   |
| 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 a | according to the real property records                        |
|   | X                               |   |
|   | Signature                       | Date  |
| Building Permit Office Certification  |                                 |   |
| I certify that  |                                 |   |
| $oxedsymbol{\boxtimes}$ the manufactured home has been affixed to $oxedsymbol{\square}$ a building permit has been issued for this purp |                                 |   |
| PRINT or TYPE Name of person signing  | Building permit office          | Building permit no.   |
| Doobti Wanna  | Shoait Count                    | MS20-0018 96-0441   |
| Position  | - South Cools                   | (Area code) Telephone no.                                     |
| Permit Tech   |                                 | 360-416-1320  |
|   | x = antille                     | en 09.29.20   |
|   | Signature                       | Date  |
| Signature of Legal Owner(s)   |                                 |   |
| Signature of legal owner indicates consent for E  | limination of Title of Herroval | from real property  |
| orginature of regal owner manages consont for a   | AAA                             | nom roar property.  |
|   | X///CCCC                        | 7   |
| MINIMINI.   | Legal owner signature           | Title, if signing for a busine                                |
| HILLANE PEREZUL   | Legal owner signature           | Title, if signing for a busines                               |
| 11 S NSE #200;  | della (Ta)                      | SNOHOMISH   |
| Notarization Certifications. State of   | FSH/NH/ON, County of            | 3,007(3)100827  |
| Signed or atte  | sted before me on . 9-22-       | -2020   |
| (Seator starms) SUBLIVE SE by ////C   | lace D Kinc by                  | Hotrid M. King  |
| FXP. 51 . G Print legal or  | wner name<br>NE PENEZ           | Print legal owner name  |
| 3. 0 - CM   | ed or stamped name              | Notary signature  |
| Title   | and                             | X 3-14-2023  Dealer/county office number or notary expiration |
| <u> </u>  |                                 | Sealer, county office number of flotary expirati              |
| Legal description Legal description of land   |                                 |   |
| All that portion of Gover   | Inment Lot5/SE                  | quarter of Sw quarter   |
| of Section 19, Township 331   | 1, Range 5 East 1               | N.M., lying North   |
| of the Northern Pacific K   | allway right or                 | way as it existing  |
| March 2 1965 , Except Sto   | ite itignway Kight              | r of way conveyed   |
| to the state of washing   | fon by a eea ice                | sorued seprember 4,   |
| 1938 under Auditor's File   | = 140. 3039 10, re              | wigs 0 ( 3) (4)   |
| County, washington  |                                 |   |
| · · · · · · · · · · · · · · · · · · ·   |                                 |   |

| Manufactured home TPO/Pla  | te or Vehicle Identification | n (VIN) number                 | /-/5                      | 732                        |  |  |
|--|------------------------------|--------------------------------|---------------------------|----------------------------|--|--|
| 8 Dealer Report of Sale  | - Selling dealer complete    | this section                   |                           |                            |  |  |
| PRINT or TYPE Dealer name  | Washington dealer no.        |                                |                           |                            |  |  |
| Date of sale   | Purchase price               | Tax juris                      | Tax jurisdiction/Tax rate |                            |  |  |
| ☐ Sales Tax Exempt – Sale t                                      | a Certified Tribal member    | on the reservation             | (attach notarize          | ed statement of delivery). |  |  |
| I certify under penalty of perjo<br>manufactured home is clear o |                              |                                |                           |                            |  |  |
| Date and place (city or county) signed                           | Dealer au                    | thorized signature             |                           |                            |  |  |
| 9 County Auditor/Agent   | Licensing Office App         | roval (not for use             | by subagents)             |                            |  |  |
| PRINT or TYPE Name   | Vanox                        | County office/VFS operator no. |                           |                            |  |  |
| I certify that the above applic<br>documentation to proceed wi   |                              |                                |                           |                            |  |  |
| 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