202011240159

11/24/2020 02:02 PM Pages: 1 of 3 Fees: \$105.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:				
First American Title Insurance Company				
2707 Colby Ave, Ste 601 Everett, WA 98201				
Escrow No. 3484547				
WASHINGTON STATE DEPARTMENT OF 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) V	ehicle identification no. (VIN) 45 ACO HA 100428 AB-SC			
2 Land				
Manufactured home will be Real property ☐ Affixed ☐ Removed Tax parcel no. P126345 Legal of	accription on page			
Lot Block Plat name or Section/Township/Range	escription on page			
4 Alger Acres Long Card	Quantin quantin addition			
3 Grantor(s) Registered/Legal Owner(s) - Additional names on				
County no. No. registered owners No. legal owners Grantee name	(if applicable)			
SKaait 2 Name of registered owner	Washington driver license or UBI no.			
Michael Bertollini	·			
Name of additional registered owner	Washington driver license or UBI no.			
Andrea Bertollini				
Address (Address, City, State, ZIP code)	•			
1788 Azure Way, Bellingham, WA 98229	Washington driver license or UBI no.			
same	The state of the s			
Name of additional legal owner	Washington driver license or UBI no.			
Address (Address, City State, ZIP code)				
I certify under penalty of perjury under the laws of the state of Washington owner(s) of this manufactured home and the foregoing information is true	that I am/we are the registered and correct. Betolicie			
Date and place (city or county) signed Begistered owner signature A Date and place (city or county) signed	But allimi			
Date and place (city or county) signed Registered owner signature	Title, if signing for a business			
Notarization/Certification State of Washington, County of	a Kagit			
signed or attested before me on 8.03)- 2020			
Seal or starry BURDETTE Notary Public Frank Michael Beyfollini Prior registered owner harmal	by Andrea D. Bertollini			
State of Washington	X ENVIOUNT TAINE			
Commission # 210673 Notary printed or stamped name	ped name Notary signature 2023			
Title	Dealer/county office number or notary expiration			
T0428429(R/8/16)WA Page T of 3	Continued on next page			

Continued on next page

Manufactured home TPO/Plat	e number (from Section 1)	245 ACO HA	100428ABSC	
4 Title Company Certific	eation			
PRINT of TYPE Name of personsign		Title company name		
Caroline Lic	Λ	First American T		
Position MH Dept			(Area code) Telephone no. (360) 350-6785	
I certify that the legal description	on of the land and ownership	o is true and correct a	ccording to the real property records.	
	• /	1	10-19-7820	
	Signature	T	Date	
5 Building Permit Office	Certification			
I certify that				
the manufactured home ha				
a building permit has been is	ssued for this purpose and th	,		
PRINT or TYPE Name of person signi	ng MANNA	Building permit office	B99L3007 (3/19-0973)	
Position		1	(Area code) Telephone no.	
<u>Permit</u>	Tech		360-416-1320	
	X	Trecisti 1	10.23.20	
	Signature	120/21	Date	
Signature of Legal Ow	mer(s)			
Signature of legal owner indic	ates consent for Elimination	of Title or Removal f	rom real property.	
organizate or regime errors in the			,	
	X			
	Legal owner	r signature	Title, if signing for a business	
	X			
	Legal owner	r 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 stampe	d name and	Notary signature	
	Title		ealer/county office number or notary expiration	
Land Description	· · · · · · · · · · · · · · · · · ·			
Legal description of land				
Lot 4, ALGER ACRES LO Auditor's File No. 200707	DNG CARD NO. PL05-(020136, records of Skagi	0208, as per plat rec it County, Washing	corded on July 2, 2007 under ton.	
		•		
	•	•		
	,			

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

Manufactured hon	ne TPO/Plate numi	per (from Section	1) 245 ACO-	4A100428	SABSC		
8 Dealer Repo	rt of Sale – Sellin	g dealer complete	this section				
PRINT or TYPE Dealer	h Corral	Inc.		Washington dealer n	8		
Date of sale	90 Purcha	16,792.	Tax juris	sdiction/Tax rate	5%		
☐ 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.							
Totale and place (city or county) signed X Dealer authorized adjanature							
9 County Audi	tor/Agent Licen	sing Office App	roval (not for use	by subagents)			
PRINT or TYPE Name County office/XFS operator no.							
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.							
* Leeley							
Signature Date							
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