

202012110119

12/11/2020 12:32 PM Pages: 1 of 6 Fees: \$108.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

**WASHINGTON STATE DEPARTMENT OF LICENSING**  
**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)
	1981	GLENR	- 60 X 28	GR1860XY

**2 Land**

Manufactured home will be  
 Affixed  Removed

Real property  
 Tax parcel no. P45525 Legal description on page W1/2NW 1/4NW1/4

Block: \_\_\_\_\_ Plat name or Section/Township/Range: S47 T35N R48E 1DE Quarter/Quarter section: W 1/2 NW 1/4 NW 1/4

Manufactured home physical location (Street address, City, State, ZIP code): 56533 MARTIN RANCH ROCKPORT WA 98283 Is location mobile home park?  Yes  No

**3 Grantor(s) Registered/Legal Owner(s) - Additional names on page \_\_\_\_\_**

County no.	No. registered owners	No. legal owners	Grantee name (if applicable)
	<u>2</u>	<u>2</u>	

Name of registered owner: Kenneth Perrigoue  
 Washington driver license or UBI no.: WDLB3554823B

Name of additional registered owner: VELMA PERRIGOUÉ  
 Ownership - Joint tenants with right of survivorship (JTWRoS):  Yes  No  
 Washington driver license or UBI no.: PERRIGOUÉ 531 JE

Address (Address, City, State, ZIP code): 56533 Martin Ranch Rd. P.O. Box 27 Rockport, Wa. 98283

Name of legal owner: SAME  
 Washington driver license or UBI no.: \_\_\_\_\_

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 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: 11/24/2020 mv  
 Registered owner signature: [Signature] Title, if signing for a business: \_\_\_\_\_

Date and place (city or county) signed: \_\_\_\_\_  
 Registered owner signature: [Signature] Title, if signing for a business: \_\_\_\_\_

Notarization (Certification)  
 State of WA, County of County, Skagit  
 Signed or attested before me on 11/24/2020  
 by Kenneth Perrigoue (Print registered owner name)  
Erinor Roney (Print registered owner name)  
 Notary printed or stamped name: NOTARY Notary signature: [Signature]  
 Title: we checked and 12/23/2021 (Dealer/county office number or notary expiration)

Continued on next page

State of Washington }  
County of Island } SS:

On this day personally appeared and sworn before me Sarah G. Johnson

I certify that I know or have satisfactory evidence that Velma Perrigoue, the person who appeared before me, and said person acknowledged that they signed this instrument and acknowledge it to be her free and voluntary act for the uses and purposes mentioned in this instrument.

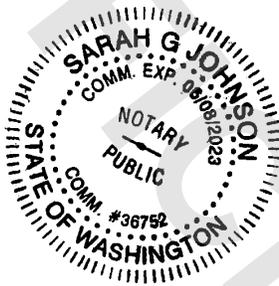
Date: 12-9-20

*Sarah G. Johnson*

Notary Public in and for the State of Washington

Residing at Old Harbor

My appointment expires: 6-8-23



UNOFFICIAL DOCUMENT

Manufactured home TPO/Plate or Vehicle Identification number (VIN) GR1960XY

**4 Title Company Certification**

PRINT or TYPE Name of person signing <u>SARAH G JOHNSON</u>	Title company name <u>Guardian Northwest Title &amp; Escrow</u>
Position <u>Closer</u>	(Area code) Telephone no. <u>360-675-2286</u>

I certify that the legal description of the land and ownership is true and correct according to the real property records.

Sarah G Johnson Signature Date 11-24-20

**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 <u>Pamela Aldridge</u>	Building permit office <u>Skagit P.D.S.</u>	Building permit no. <u>M20-0020</u>
Position <u>Permit Tech.</u>	(Area code) Telephone no. <u>360-416-1339</u>	

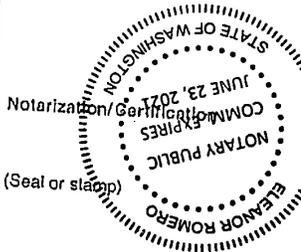
Pamela Aldridge Signature Date 11-30-2020

**6 Signature of Legal Owner(s)**

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

Kenneth Perrigoue Legal owner signature Title, if signing for a business  
 Velma Perrigoue Legal owner signature Title, if signing for a business

State of WA County of Skagit  
 Signed or attested before me on 11/24/2020



Kenneth Perrigoue by Eleanor Romero  
 Print legal owner name Notary printed or stamped name  
Notary and Eleanor Romero Notary signature  
 Title Date 6/23/2021 Notary expiration

**7 Land Description**

Legal description of land  
see attached  
 Ptn W1/2 of the NW 1/4 of the NW 1/4 of Section 23, Township 35 North, Range 10 East, W.M. as in Exhibit "A" attached hereto.

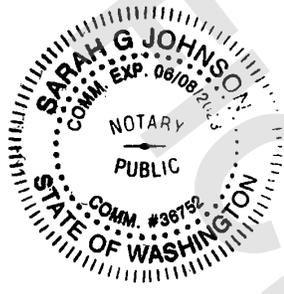
State of Washington  
County of Island } SS:

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I certify that I know or have satisfactory evidence that Velma Perrigoue, the person who appeared before me, and  
said person acknowledged that they signed this instrument and acknowledge it to be her their free and voluntary  
act for the uses and purposes mentioned in this instrument.

Date: 12-9-20



Notary Public in and for the State of Washington  
Residing at Edinboro  
My appointment expires: 6-9-23



UNOFFICIAL DOCUMENT

Manufactured home TPO/Plate or Vehicle Identification number (VIN) **GR1860XY**

**8 Dealer Report of Sale** – Selling dealer complete this section

PRINT or TYPE Dealer name		Washington dealer no.
Date of sale	Purchase price <b>1111</b>	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 \_\_\_\_\_ **X** Dealer authorized signature

**9 County Auditor/Agent Licensing Office Approval** (not for use by subagents)

PRINT or TYPE Name <b>Youa Vandy</b>	County office/VFS operator no. <b>VLR 2901</b>
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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.

**X** Signature \_\_\_\_\_ Date **12-11-2020**

**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

**EXHIBIT "A"**  
**Property Description**

That portion of the West 1/2 of the Northwest 1/4 of the Northwest 1/4 of Section 23, Township 35 North, Range 10 East W.M., described as follows:

Beginning at the intersection of the North line of the State Highway and the Southeasterly marginal line of the Seattle Municipal Railway; thence East along the North line of the State Highway, 427 feet; thence North to the Southeasterly line of said railway right of way; thence Southwesterly along the said railway right of way line to the point of beginning.