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10/14/2021 01:42 PM Pages: 1 of 3 Fees: \$205.50 Skapit County Auditor

RETURN RECORDED DOCUMENT TO: Coach Corral Inc. 3906 Cedardale Rd Mt Vernon Wa 98274

CHICAGO TITLE 6200 49437

	WASHINGTON STATE DEPAR	NG		licat	tion	$oldsymbol{\square}$	lease check one: Title Elimination	
	uctions on compl Instructions, form			factured	1 Home		Transfer in Location Removal from Real Property	
Manufactured Home								
Title purpose 2F91-024	only (TPO)/Plate no.	Year 2014	Make	Length/	Width (feet)	Vehicle identific 2F91-0245		
Land								
	Real property Affixed Removed Tax parcel no. P116982 Legal description on page 2							
Lot 4	Block		Plat name or Sec Town of cor	tion/Town	ship/Range		Quarter/Quarter section	
	home physical location the Superior Ave						Is location mobile home park?	
Grantor(s) Registered/Legal Owner(s) - Additional names on page								
County no.		registered own			Grantee na	me (if applicable)		
29	1				Coach (Corral, Inc		
Name of regi	stered owner				<u> </u>		Washington driver license or UBI no.	
Coach Co	orral Inc.,					91-021945		
Name of add	Washington driver license or UBI no.							
Address (Address, City, State, ZIP code) 3906 Cedardale Rd. Mount Vernon WA 98274								
Name of legal owner CORRALINE Washington driver license of								
Name of add	itional legal owner						Washington driver license or UBI no.	
3906	dress, City State, ZIP CEDARD	ALE 1	RD, MT	VEF	2000	, WA	98274	
owner(s)	of this manufactur	ed home a	and the foregoir	e state o	of Washing pation is t	ton that I am/ ue and correc	we are the registered	
Date and pla	ce (city or county) sign	RNON led		etered own	ner signature		Title, if signing for a business	
Date and place (city or county) signed Registered owner signature Notarization/Certification State of County of State of Cou								
Notary Public State of Washington (Seal or stample NNA WOHLMAN Notary Public Signed or attested before me on OCTOM 13 Print registered owner name by Print regis								
My C	omm. Expires 04 Commission # 8	021	Notary printed or s	tamped n	101/1M	Notary sign	matura 125	
L			Title)		ounty office number or notary expiration	
TD-420-729 (R/1	0/20)WA Page 1 of 3			•	-		Continued on next page	

Continued on next page

Manufactured home TPO/Plate or Vehicle Identification number (VIN) 2F91-0245-G BA 4 Title Company Certification 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 according to the real property records. Signature **Building Permit Office Certification** \square the manufactured home has been affixed to the real property as described. \square a building permit has been issued for this purpose and the attachment will be inspected upon completion. G. Signature of Legal Owner(s) Signature of legal owner indicates consent for Elimination of Title or Removal from real proper Legal owner signature Title, if signing for a business **Notarization/Certification** State of or attested before me on (Seal or stamp) Notary Public State of Washington DEANNA WOHLMAN My Comm. Expires C4/07/2025 Commission # 8021 Dealer/county office number or notary expiration Land Description Legal description of land Lot 4, TOWN OF CONCRETE SHORT PLAT NO. CON-89-01, approved June 14, 1989, and recorded December 1, 1989, in Volume 8 of Short Plats, page 192, under Auditor's File No. 8912010018, records of Skagit County, Washington; being a portion of lot 12, plat of Sunrise Addition. Situated in Skagit County, Washington.

TD-420-729 (R/10/20)WA Page 2 of 3

Manufactured home TPO/Plate or Vehicle Identification number (VIN) 2F91-0245-G BA									
Dealer Report of Sale - Selling dealer complete this section									
PRINT or TYPE Dealer name Coach Corral Inc., Washington dealer pe	Washington dealer pa								
Date of sale 0 6 Purchase price 329.19 Tax jurisdiction Tax rate 2005/5	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.									
Date and place (city or county) signed Dealer authorized signature	>								
County Auditor/Agent Licensing Office Approval (act for use by subagents)									
PRINT or TVPE Name County office/VES, operator no. Which is a second of the county office/VES, operator no.									
I certify that the above application appears to be completed correctly, and the applicant has suff documentation to proceed with the recording of this form	ficient 1)-14-21								
	ate								
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