202207060120

07/06/2022 03:05 PM Pages: 1 of 3 Fees: \$205.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

COACH CORRAL INC. 3906 CEDARDALE ROAD MOUNT VERNON, WA. 98274

WASHINGTON STATE DEPA	RTMENT OF	Manufac	ture	d Hon	1 e	Please check one	e:	
LICENS		App	licat	tion		Title Elimination	1	
For full instructions on comp	leting this	form, see Manu	factured	Home.		☐ Transfer in Loca		
Application Instructions, forn	n TD-420-7	'30.		-		Removal from F	Real Property	
Manufactured Hom	е					- -		
Title purpose only (TPO)/Plate no. Year		Make				icle identification no. (VIN)		
1990		Fltwd	Fltwd		ORI	RFLL48A11096BS		
2 Land								
Manufactured home will be	Real prope	- DED 40 4				2		
☐ Affixed ☑ Removed	Tax parc	CITIO:						
Lot Block	Plat name or Section/Township/Range SKYLINE NO.6				Quarter/Quarter	section		
Manufactured home physical location (Street address, City, State, ZIP code)							e home park?	
2304 GRANT PLACE ANACORTES, WA. 98221							lo	
3 Grantor(s) Register				al names o	on page	· · · · · · · · · · · · · · · · · · ·		
	registered ov			Grantee na				
SKAGIT 1		1 ,						
Name of registered owner	-	,				Washinglondriveri		
TIMOTHY JON CONE	LIN					WOL 2278C	FBS B	
Name of additional registered owner Ownership Joint tenants w/right Washington driver license or UBI no.								
			(J	survivorship [Yes	□No		
Address (Address, City, State, ZIP	code)						_	
2304 GRANT PLACE A	NACOR	TES, WA. 982	21					
Name of legal owner						Washington driver I	icense or UBI no.	
SAME AS ABOVE								
Name of additional legal owner						Washington driver I	icense or UBI no.	
Address (Address, City State, ZIP	code)							
I certify under penalty of p	erjury unde	er the laws of th	e state i	of Washing	ton tha	t I am/we are the regist	ered	
owner(s) of this manufactu			ng inforr	nation is tr	ue and	correct.		
10-17-2022 A	NACORTI	zs 🔉	In	r Ci	NK	em		
Date and place (city or county) sig		Regis	stered own	ner signature		Title, if sign	ing for a business	
Date and place (city or county) sig	ned	Regis	stered owr	ner signature		Title, if sign	ing for a business	
Notalization/Sertification Pulled My Comm. Excit	Sta	ate of <u>WA</u>	<u> </u>			SKAGIT		
MY CEANNA Wash	lina Sid	ned or attested b	efore me	e on	-17-	2022		
DEANNA WOH Comm. Expires of (Seal or stamp) minissing	LMAN	TIM	onkl					
DEANNA WOH OF COMM. EXPIRES OF SEALON SEALO	4/07/20 by	Print registered ow			by _	rint redistered owner name		
- F 8	1021 2025	Deann	X Wi	Mmar	1	rint registered owner name	un	
_		Notary printed or s	tamped na		1	lotary signature	2025	
		Title	ney		_and -	lealer/county office number or		
TD-420-729 (R/10/20)WA Page 1 of 3							ed on next pag	

Manufactured home TPO/Plate or Vehicle Identification number (VIN)										
4 Title Company Certification										
PRINT or TYPE Name of person signing	Title company name	Title company name								
Jennie Barnwell	Land Tit	te e escrow								
Position		(Area code) Telephone no.								
Title Manager		(360)707-2158								
I certify that the legal description of the land and ownership is true and correct according to the real property records.										
X Signatur	maie Ba									
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	Building permit office	Building permit no.								
Position		(Area code) Telephone no.								
x										
Signatur	е	Date								
6. Signature of Legal Owner(s)										
Signature of legal owner indicates consent for Elimination of Title or Removal from real property.										
1	ner signature	Title, if signing for a business								
X Legal ov	vner signature	Title, if signing for a business								
Notarization/Certification State of WA	, County of	SKAGIT								
	1-17	2022								
Notary Public Signed or attested before me on 6-11-2027 (Seal or stamp State of Washington by DEANNA WOHLMAN Print legal owner name Print legal owner name)										
My Comm. Expires 04/07/2025 DE A-max. Commission: # 8021 Notaly printed or star	Wohlman _	otary signature 4 - 7 - 2 - 2 - 7								
L Nota	and and	7-1-2025								
Title	, ,	ealer/county office number or notary expiration								
7 Land Description										
Legal description of land										
LOT 14 SKYLINE NO. 6, AS PER PLAT RECORDED IN VOLUME 9 OF PLATE, PAGES 64 THROUGH. 76A, INCLUSIVE, RECORDS OF SKAGIT COUNTY, WASHINGTON										
W7A										

Dealer F	Report of Sale – S	elling dealer complete	this section					
PRINT or TYPE	Dealer name		Washington dealer no.					
Date of sale	Pu	Tax juris	ax jurisdiction/Tax rate					
☐ Sales Tax	Exempt – Sale to a 0	Certified Tribal member	on the reservation	(attach notarize	ed 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								
9 County Auditor/Agent Licensing Office Approval (not for use by subagents)								
PRINT or TYPE Name 150 HINDMAN County office/VEC operator go.								
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								
10 Title Fees								
Filing fee	Application	Mobile home fee	Elimination fee	Use tax	Subagent fees			
	. I		1		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