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09/12/2022 03:45 PM Pages: 1 of 4 Fees: \$206.50  
Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

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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

<b>1 Manufactured Home</b>				
Title purpose only (TPO)/Plate no.	Year	Make	Length/Width (feet)	Vehicle identification no. (VIN)
	2022	PLMH	41 X 76	PHH3100R2114754AB
<b>2 Land</b>				
Manufactured home will be <input type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property Tax parcel no. <u>P126536</u> Legal description on page <u>PL04-0594</u>		
Lot 2	Block	Plat name or Section/ Township/ Range 07 36 04		Quarter/ Quarter section SE
Manufactured home physical location (Street address, City, State, ZIP code) 1663 LAKE SAMISH ROAD BELLINGHAM WA 98229				Is location mobile home park? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Grantor(s) Registered/Legal Owner(s)</b> —Additional names on page _____				
County no. SKAGIT	No. registered owners	No. legal owners	Grantee name (if applicable)	
Name of registered owner WALTER M ORTEZ				Washington driver license or UBI no. WDLBB55FJ13B
Name of additional registered owner ESMERALDA ORTEZ				Washington driver license or UBI no. WDL6P9N0013B
Ownership—Joint tenants w/right of survivorship (JTWR0S) <input type="checkbox"/> Yes <input type="checkbox"/> No				
Address (Address, City, State, ZIP code) 1663 LAKE SAMISH ROAD BELLINGHAM WA 98229				
Name of legal owner WALTER M ORTEZ				Washington driver license or UBI no. WDLBB55FJ13B
Name of additional legal owner ESMERALDA ORTEZ				Washington driver license or UBI no. WDL6P9N0013B
Address (Address, City, State, ZIP code) 1663 LAKE SAMISH ROAD BELLINGHAM WA 98229				
I declare under penalty of perjury under the law of Washington that I am/we are the registered owners of this manufactured home and the foregoing information is true and correct.				
Date and place (city or county) signed Mt Vernon 9/12/2022		Registered owner signature Walter M Ortiz		
Date and place (city or county) signed Mt Vernon 9/12/2022		Registered owner signature Esmeralda Ortiz		
Notarization/Certification		State of <u>WA</u> County of <u>Skagit</u>		
Signed or attested before me on by <u>Walter Esmeralda Ortiz</u>		9-12-22		
(Seal or stamp) SKAGIT COUNTY AUDITOR VLR 2901		Print registered owner name		
		Notary printed or stamped name VLR		
		Notary signature 290101		
		Title		
		Dealer/county office number or notary expiration		

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

**4 Title Company Certification**

PRINT or TYPE Name of person signing

Title company name

Position

(Area code) Phone number

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

**X**

Signature

Date

**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 number

Pamela Aldridge

SKagit PDS.

BP20-0775

Position

(Area code) Phone number

Permit Tech

**X**

Signature

Date

Pamela S. Aldridge 9-12-2022

**Signature of Legal Owner(s)**

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

**X**

Legal owner signature

Title, if signing for a business

**X**

Legal owner 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 stamped name

Notary signature

Title

and **X** Dealer/county office number or notary expiration**Land Description**

Legal description of land

see exhibit "A"

Manufactured home TPO/Plate or Vehicle Identification number (VIN) _____					
<b>8 Dealer Report of Sale</b> —Selling dealer complete this section					
PRINT or TYPE Dealer name				Washington dealer no.	
Date of sale	Purchase price		Tax jurisdiction/Tax rate		
<input type="checkbox"/> Sales Tax Exempt—Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).					
I declare under penalty of perjury under the law 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 _____				<input checked="" type="checkbox"/> Dealer authorized signature	
<b>County Auditor/Agent Licensing Office Approval</b> (not for use by subagents)					
PRINT or TYPE Name <i>Denise Hindman</i>				County office/VPS operator no. <i>290101</i>	
I declare that the above application appears to be completed correctly and the applicant has sufficient documentation to proceed with the recording of this form.					
<input checked="" type="checkbox"/> Signature <i>Denise Hindman</i>				Date <i>9/12/22</i>	
<b>10 Title Fees</b>					
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

LOT 2 OF SKAGIT COUNTY SHORT PLAT PL04-0594, RECORDED  
UNDER AF#200708030088, BEING A PORTION OF SE1/4 OF SW1/4 AND SW1/4 OF  
SE1/4, SECTION 7, TOWNSHIP 36 NORTH, RANGE 4 EAST, W.M.

SITUATE IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON