202311170045

Continued on next page

11/17/2023 01:30 PM Pages: 1 of 4 Fees: \$206.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

Gail Sue Moore 7246 Holiday Boulevard Anacortes, WA 98221

	NOTON STATE DEPART		Manufactur	ed Home		riease c	heck one:
COT LI	CENSI	NG	Applica	ation	[3	Title E	limination
						Transfer in Location	
For full instructi	ons on completin	g this form, s	see Manufactured Home Application			Removal from Real Property	
	form TD-420-730 tured Home		· ··				
	y (TPO)/Plate no.	Year	Make Leng	th/Width (feet)	Vehicle	identification	n no. (VIN)
	, (2023	CHAMP 4				A 101467 A
2 Land				13			
Manufactured ho		Real propert	PLEAS	2			
X Affixed	Removed		no. <u>P65893</u>		Legal de	escription o	on page 2
Lot 58	Block 3	E	Plat name or Section/Tov Holiday Hideaway No.	. 1			Quarter/Quarter section 08 - 35 ~ 02
	me physical location Soulevard, Anacor		ss, City, State, ZIP code,)			Is location mobile home park? Yes X No
3 Grantor(s) Registered	/Legal Ow	ner(s) - Additiona	l names on pa	ige		<u> </u>
SKAGIT	No. regi:	stered owners	No. legal owners	Grantee name N/A	(if applica	able)	
Name of registers Gail Sue Moore						Washingto	n driver license or UBI no.
	al registered owner		Own	ership – Joint tena	ints		n driver license or UBI no.
				ght of survivorship VROS) Yes			
	s, City, State, ZIP co	-					•
7246 Holiday B Name of legal ow	Boulevard, Anacor	tes, WA 9822	:1			Machinete	n debug liennen er LIDI ne
Name of legal ow	wici					wasiiiigto	n driver license or UBI no.
Name of additional legal owner						Washington driver license or UBI no.	
Address (Address	s, City State, ZIP co	de)					
I declare und	ier penalty of pe	eriurv under	the laws of the st	ate of Washing	aton the	at I am/w	e are the registered
owner(s) of t	his manufactur	ed home and	d the foregoing inf	ormation is tru	ie and d	correct.	-
1/10/2	Frever	4 11/A	x#Z) 0 V	1/2	2	2
Date and place	(city or county) sig	ned	Registered o	wner signature	-		Title, if signing for a business
			X				
Date and place	(city or county) sig	ned	Registered o	wner signature			Title, if signing for a business
Notare and place	Claration	St	ate of WA	, Cou	nty of	nohe	mish
ESCOLUTION OF ES	ON EXCHANGE	Sig	gned or attested befo	1 /	610	13	
by Gail Sue Moore by						. 1	
Signed or attested before me on by Gall Sue Moore by Print registered pwner name Notary printed or stamped name Notary Signature Notary Title TD-420-729 (R/10/20) WA Page 1 of 3						ed owner name	
III CAMAN O	ABUC E O		Notary printed or stamp	<u>Uinslo</u>	\underline{w}	tokaryjsignat	whole
WY E OF	Minney HA	=	Notary		and	Xlaz	125
7/10/1	MANININA		Title			Dealer/county	office number or notary expiration
TD-420-729 (R/10	/20) WA Page 1 of :	3					Continued on next page

Manufactured home TPO/Plate or	Vehicle Identification (\	/IN) number <u>245000 H /</u>	7101467A
4 Title Company Certification	<u> </u>		
PRINT or TYPE Name of person signing	MILARCH	Title company name First American Title Insurance Comp	anv
Position III ACCOUNT	o G	(Area code)	Telephone no.
MTT KAULSTE	19	(425)258-4	1104
I certify that the legal description o	of the land and ownership X Signature	is true and correct according to the	e real property records. 7-20-2023 Date
5 Building Permit Office Cert	ification		
I certify that			
the manufactured home has bee		•	
	- · · · · · · · · · · · · · · · · · · ·	attachment will be inspected upon co	<u></u>
PRINT or TYPE Name of person signing	rano	Wilding permit office Lewilding permit n DECON+108 15+22-07	61/M23-0018
Permit Tech		(Area code) Tele	nhonk no. 320
	Signature	achel Taha	W 7/25/23
6 Signature of Legal Owner(s	o)		
			
Signature of legal owner indicate:	X Legal owner	<u> </u>	te, if signing for a business
	X		
	Legal owner	signature Til	tle, if signing for a business
Notarization/Certification	State of WA	, County of Skagit	
	Signed or attested before	ore me on	
(Seel or storm)	h	h	_
(Seal or stamp)	Print legal owner name	by Print legal owner	name
	Notary printed or stamp	ed name Notary signature	
	Notary	and X	
	Title		fice number or notary expiration
7 Land Description			
Legal description of land Lots 58, Block 3, HOLIDAY HIDEAWA' Skagit County, Washington.	Y NO. 1 as per plat recorde	d in Volume 8 of Plats, pages 36 thro	ugh 42, inclusive, records of
Situate in the County of Skagit, State	of Washington.		
TD-420-729 (R/10/20) WA Page 2 of 3		-	Continued on next page

Manufactured home TPO/Plate number (from Section 1)						
Dealer Report of Sale – Selling dealer complete this section						
PRINT or TYPE Pealer name COWAL TNC. Washington dealer no.						
Date of sale Date o						
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.						
5/11/23 Mt Vernon 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 County office/VFS operator no 2001						
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						
Total fees and tax						

2116000401011110714

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



Certificate of Fact

Use this form to make a statement of fact.

License plate/Registration number		Vehicle Identification Number (VIN) or Hull Identification Number (HIN) 245000HA101467A		
Model year	Make	Model		
2023	CHAMP	40/13		
I certify that	•			
		terican Title, made an error in the home measurements. The home is 40 x 13. I tended.		
7/28/2023 MASON		e laws of the state of Washington that the foregoing is true and correct. X Sighature		
Date and place (city or county) s	ignea			
		LAURA MILARCH		
		Printed name of person signing this document		