



202402070028

02/07/2024 01:54 PM Pages: 1 of 3 Fees: \$305.50 Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

SAMISH RIVER CONSTRUCTION LLC
528 F + S GRADE RD
SEDR0-WOOLLEY WA 98284



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) |
| | 2023 | CLAYTON | 48x27 | ALB042843OR - AB |
| 2 Land | | | | |
| Manufactured home will be | | Real property | | |
| <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed | | Tax parcel no. P136839 Legal description on page 2 | | |
| Lot | Block | Plat name or Section/Township/Range | | Quarter/Quarter section |
| 4 | | BAKER ESTATES | | NE 23 |
| Manufactured home physical location (Street address, City, State, ZIP code) | | | | Is location mobile home park? |
| 514 F + S GRADE RD, SEDRO-WOOLLEY, WA 98284 | | | | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |
| 3 Grantor(s) Registered/Legal Owner(s) —Additional names on page _____ | | | | |
| County no. | No. registered owners | No. legal owners | Grantee name (if applicable) | |
| 2901 | 1 | | | |
| Name of registered owner | | | Washington driver license or UBI no. | |
| SAMISH RIVER CONSTRUCTION LLC | | | 601-401-731 | |
| Name of additional registered owner | | | Washington driver license or UBI no. | |
| 528 F + S GRADE RD SEDRO-WOOLLEY WA 98284 | | | | |
| Address (Address, City, State, ZIP code) | | | Ownership—Joint tenants w/right of survivorship (JT/WROS) <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Name of legal owner | | | Washington driver license or UBI no. | |
| Name of additional legal owner | | | Washington driver license or UBI no. | |
| Address (Address, City State, ZIP code) | | | | |
| 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. | | | | |
| 2/7/2024 Mount Vernon | | X [Signature] | | OWNER |
| Date and place (city or county) signed | | Registered owner signature | | Title, if signing for a business |
| Date and place (city or county) signed | | Registered owner signature | | Title, if signing for a business |
| Notarization/Certification | | | | |
| State of Washington | | County of Skagit | | |
| Signed or attested before me on February 7, 2024 | | | | |
| by Nicole M. Petersen | | by [Signature] | | |
| Print registered owner name | | Print registered owner name | | |
| Cindy L. Adams | | Cindy L. Adams | | |
| Notary printed or stamped name | | Notary signature | | |
| Notary | | and 10/19/2026 | | |
| 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 |
| <i>Dobby Castilleja</i> | | 2023-184 |
| Position | (Area code) Phone number | |
| <i>Building Inspector</i> | 360-855-0771 | |

[Signature] 2/6/24
Signature Date

6 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 _____ and **X** _____
Title Dealer/county office number or notary expiration

7 Land Description

Legal description of land

(0.2416) ac LOT 4, BAKER ESTATES SHORT PLAT, RECORDED UNDER AF#202306160048, BEING PORTION OF LOT 7, PLAT OF SAMISH ESTATES, RECORDED UNDER AF#202105050092 LOCATED IN THE NORTHEAST QUARTER OF THE NORTHEAST QUARTER SECTION 23, TOWNSHIP 35 NORTH, RANGE 4 EAST, W.M.

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

| | | | | | |
|---|----------------|-----------------|---|---|-----------------------|
| 8 Dealer Report of Sale —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 (<i>attach notarized statement of delivery</i>). | | | | | |
| 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 | | |
| 9 County Auditor/Agent Licensing Office Approval (<i>not for use by subagents</i>) | | | | | |
| PRINT or TYPE Name <i>Heather Lum</i> | | | | County office/VFS operator no. <i>290102</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>Heather Lum</i> | | Date <i>2/7/24</i> |
| 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