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09/03/2024 02:42 PM Pages: 1 of 3 Fees: \$305.50  
Skagit County Auditor

## RETURN, RECORDED DOCUMENT TO:

Guardian NW Title + Escrow  
PO Box 1667  
MT Vernon WA 98273  
GNW 24-21433-KH

WASHINGTON STATE DEPARTMENT OF  
LICENSINGManufactured Home  
ApplicationFor 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)
PHH310OR23-15651 A/B	2024	Palm Harbor	56 x 27	PHH310OR23-15651 A/B

## 2 Land

Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed	Real property Tax parcel no. <u>P121505</u>	Legal description on page _____
Lot <u>Tract 13 PTN</u>	Block _____	Plat name or Section/Township/Range <u>Sunrise Addition</u>
Manufactured home physical location (Street address, City, State, ZIP code) <u>7674 South Reitze Avenue Concrete WA 98237</u>		Is location mobile home park? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## 3 Grantor(s) Registered/Legal Owner(s) - Additional names on page \_\_\_\_\_

County no. <u>29</u>	No. registered owners <u>1</u>	No. legal owners _____	Grantee name (if applicable) _____
Name of registered owner <u>Michael Benninghoven-Sparks</u>		Washington driver license or UBI no. <u>WDL1NP17F2SB</u>	
Name of additional registered owner _____		Washington driver license or UBI no. _____	
Ownership - Joint tenants w/right of survivorship (JTROS) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Address (Address, City, State, ZIP code) <u>7674 South Reitze Avenue; Concrete WA 98237</u>			
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.

Date and place (city or county) signed <u>8/19/24 Skagit</u>	Registered owner signature <u>[Signature]</u>	Title, if signing for a business _____
Date and place (city or county) signed _____	Registered owner signature <u>X</u>	Title, if signing for a business _____

Notarization/Certification State of WA, County of Skagit  
Signed or attested before me on 8-19-24 KB  
by Michael Benninghoven-Sparks

KYLE BEAM  
(Seal or stampary Public  
State of Washington  
Commission # 210008  
My Comm. Expires Sep 11, 2027)

by <u>Kyle Beam</u> Print registered owner name Notary printed or stamped name <u>Notary</u>	by <u>Michael Benninghoven-Sparks</u> Print registered owner name Notary signature <u>[Signature]</u> Notary signature <u>9-11-27</u>
Title _____	Dealer/county office number or notary expiration _____

Manufactured home TPO/Plate or Vehicle Identification number (VIN) PHH310OR23-15651 A/B

<b>4 Title Company Certification</b>	
PRINT or TYPE Name of person signing <u>Tia Bentley</u>	Title company name <u>Guardian Northwest Title Escrow</u>
Position <u>Escrow Closer</u>	(Area code) Phone number <u>360 424 0111</u>
I declare that the legal description of the land and ownership is true and correct according to the real property records.	
X Signature <u>[Signature]</u>	Date <u>9/9/24</u>

<b>5 Building Permit Office Certification</b>	
I certify that	
<input checked="" type="checkbox"/> the manufactured home has been affixed to the real property as described.	
<input type="checkbox"/> a building permit has been issued for this purpose and the attachment will be inspected upon completion.	
PRINT or TYPE Name of person signing <u>RICHARD D. AAMOT</u>	Building permit office <u>TOWN OF CONCRETE</u>
Position <u>BUILDING INSPECTOR</u>	Building permit number <u>21-1238</u>
	(Area code) Phone number <u>360-708-5530</u>
X Signature <u>[Signature]</u>	Date <u>AUG. 29 24</u>

<b>6 Signature of Legal Owner(s)</b>	
Signature of legal owner indicates consent for Elimination of Title or Removal from real property.	
X Legal owner signature <u>[Signature]</u>	Title, if signing for a business
X Legal owner signature <u>[Signature]</u>	Title, if signing for a business
Notarization/Certification	State of <u>WA</u> , County of <u>Skagit</u>
	Signed or attested before me on <u>8-19-24</u>
(Seal or stamp) KYLE BEAM Notary Public State of Washington Commission # 210008 My Comm. Expires Sep 11, 2027	by <u>Michael Benninghoven - Sparks</u> Print legal owner name <u>Kyle Beam</u> Notary printed or stamped name <u>Notary</u> Title <u>Notary</u>
	and <u>9-11-27</u> Print legal owner name Notary signature Dealer/county office number or notary expiration

<b>7 Land Description</b>
Legal description of land
That portion of the East 1/2 of Tract 13, PLAT OF SUNRISE ADDITION, SKAGIT COUNTY, as per plat recorded in Volume 4 of Plats, Page 44, records of Skagit County, Washington, described as follows: Beginning at the Northeast corner of Tract 13; thence South along First Avenue 200 feet to the True Point of Beginning; thence South along First Avenue, a distance of 65 feet; thence West 200 feet; thence North 65 feet; thence East 200 feet to the True Point of Beginning.

Manufactured home TPO/Plate or Vehicle Identification number (VIN) PPH310OR23-15651A / B

<b>8 Dealer Report of Sale</b> —Selling dealer complete this section					
PRINT or TYPE Dealer name Homes Direct of Washington LLC				Washington dealer no. 4953	
Date of sale 2/26/2022		Purchase price \$185,610.98		Tax jurisdiction/Tax rate 8.6%	
<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.					
8-15-24 Skagit Date and place (city or county) signed			Heather Adams Dealer authorized signature		
<b>9 County Auditor/Agent Licensing Office Approval</b> (not for use by subagents)					
PRINT or TYPE Name Heather Wm				County office/VFS operator no. 2901-02	
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.					
X Signature			Heather Date 9-3-24		
<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