



202501300051

01/30/2025 11:02 AM Pages: 1 of 4 Fees: \$306.50
Skagit County Auditor

RETURN RECORDED DOCUMENT TO:

Nicole Marie Burnett
18550 West Big Lake Boulevard
Mount Vernon, WA 98274



Manufactured Home
Application

Please check one:

- ☒ Title Elimination
☐ Transfer in Location
☐ Removal from Real Property

For full instructions on completing this form, see **Manufactured Home Application Instructions**, form TD-420-730.

1 Manufactured Home			
Title purpose only (TPO)/Plate no.	Year 2024	Make CMH	Length/Width (feet) 56 x 28
		Vehicle identification no. (VIN) ALB043569ORAB	
2 Land			
Manufactured home will be <input checked="" type="checkbox"/> Affixed <input type="checkbox"/> Removed		Real property Tax parcel no. P116325/3863-000-070-0100 Legal description on page 2	
Lot PRTN TR 70	Block	Plat name or Section/Township/Range FIRST ADDITION, BIG LAKE WATER FRONT TRACTS	
Quarter/Quarter section		Is location mobile home park? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Manufactured home physical location (Street address, City, State, ZIP code) 18550 West Big Lake Boulevard, Mount Vernon, WA 98274			
3 Grantor(s) Registered/Legal Owner(s) - Additional names on page			
County no. SKAGIT	No. registered owners 2	No. legal owners	Grantee name (if applicable) N/A
Name of registered owner Nicole Marie Burnett		Washington driver license or UBI no. WDLB5TP8B53B	
Name of additional registered owner David L. Anderson		Washington driver license or UBI no.	
Address (Address, City, State, ZIP code) 18550 West Big Lake Boulevard, Mount Vernon, WA 98274		Ownership - Joint tenants w/right of survivorship (JTWR0S) <input checked="" 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 laws of the state of Washington that I am/we are the registered owner(s) of this manufactured home and the foregoing information is true and correct.			
3/8/2024 Lake Havasu City Date and place (city or county) signed		X [Signature] Registered owner signature Title, if signing for a business	
3.13.2024 Everett Date and place (city or county) signed		X [Signature] Registered owner signature Title, if signing for a business	
Notarization/Certification			
State of ^{pab} WA Arizona, County of Mohave		Signed or attested before me on Mar. 8, 2024	
(Seal or stamp)		by David L. Anderson	
PATRICIA A SAER Notary Public - Arizona Mohave County Commission # 632789 My Comm. Expires Sep 17, 2026		Print registered owner name Patricia A. Baer	
		Notary printed or stamped name X Patricia A. Baer	
		Notary signature	
		Notary Title	
		and 09/17/2026 Dealer/county office number or notary expiration	

Acknowledgement

State of: Washington)

) ss.

County of: Snohomish)

I certify that I have satisfactory evidence that Nicole Burnett is the person who appeared before me and said person acknowledged that she signed this instrument and acknowledged it to be her free and voluntary act for the use and purpose mentioned in this instrument.

Dated: March 13, 2024



Angel M. Moses

Notary Public for the state of Washington

In the county of Snohomish

My commission expires August 9, 2027



Manufactured home TPO/Plate or Vehicle Identification (VIN) number ALB043569 DRAB

4 Title Company Certification		
PRINT or TYPE Name of person signing LAURA MILARCH	Title company name First American Title Insurance Company	
Position MA processing	(Area code) Telephone no. 360 350 6765	
I certify that the legal description of the land and ownership is true and correct according to the real property records.		
x <u>Laura Milarch</u> Signature		<u>12/3/2024</u> Date
5 Building Permit Office Certification		
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 Alvaro fregozo	Building permit office Skagit County	Building permit no. BP23-0914
Position Plans Examiner	(Area code) Telephone no. 360-416-1320	
x <u>Alvaro Fregozo</u> Signature		<u>01/27/25</u> 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 <u>WA</u> , County of _____		
Signed or attested before me on _____		
(Seal or stamp)	by _____ Print legal owner name	by _____ Print legal owner name
	Notary printed or stamped name	Notary signature
	_____ and X Title Dealer/county office number or notary expiration	
7 Land Description		
Legal description of land		
That portion of Tract 70, FIRST ADDITION, BIG LAKE WATER FRONT TRACTS, according to the plat thereof recorded in Volume 4 of Plats, page 15, records of Skagit County, Washington, lying Southerly of the H.C. Peters Road No. 263 (West Big Lake Boulevard), as conveyed to Skagit County by Deed recorded May 26, 1947, under Auditor's File No. 104828, records of Skagit County, Washington.		
Situating In Skagit County, Washington.		

Manufactured home TPO/Plate or Vehicle Identification number (VIN) ALB0435690RAB

8 Dealer Report of Sale —Selling dealer complete this section					
PRINT or TYPE Dealer name Homes Direct of Washington LLC				Washington dealer no. 4953	
Date of sale 2/15/2024		Purchase price \$190,704.31		Tax jurisdiction/Tax rate 8.2%	
<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.					
9-5-24 Skagit			Heather Adams		
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 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 				1-30-25	
Signature				Date	
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