



200307160020

Skagit County Auditor

RETURN ADDRESS

7/16/2003 Page

1 of

2 8:41AM

Philip M. Dan

17318 Di Al Tsa Lane

LaConner, Wa. 98257

105413-PE

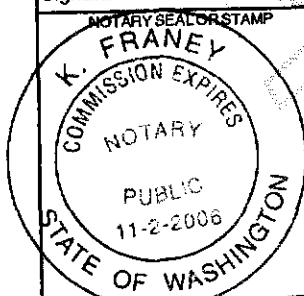
STATE OF WASHINGTON Department of Licensing		MANUFACTURED HOME APPLICATION		PLEASE CHECK ONE	
Anyone who knowingly makes a false statement of a material fact is guilty of a felony, and upon conviction may be punished by a fine, Imprisonment, or both. (RCW 46.12.210)				☒ TITLE ELIMINATION ☐ TRANSFER IN LOCATION ☐ REMOVAL FROM REAL PROPERTY	
1 MANUFACTURED HOME					
TPO / PLATE NUMBER	YEAR	MAKE	LENGTH/WIDTH(FEET)	VEHICLE IDENTIFICATION NUMBER (VIN)	
	2002	FUQUA	86 X 38	18260	
2 LAND					
MANUFACTURED HOME WILL BE ☒ AFFIXED ☐ REMOVED				REAL PROPERTY TAX PARCEL NUMBER	
				P118833	
LOT	BLOCK	PLAT NAME OR SECTION/TOWNSHIP/RANGE		QUARTER/QUARTER SECTION	
				35-34-2	
3 GRANTOR(S) REGISTERED/LEGAL OWNER(S)					
COUNTY NUMBER		NUMBER OF REGISTERED OWNERS		NUMBER OF LEGAL OWNERS	
		1		1	
NAME OF REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
Philip M. Dan				Dan Pm637J6	
NAME OF ADDITIONAL REGISTERED OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE ZIP CODE	
17318 Di Al Tsa Lane,		LaConner		Wa. 98257	
NAME OF LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
WHIDBY ISLAND BANK					
NAME OF ADDITIONAL LEGAL OWNER				DOL CUSTOMER ACCOUNT NUMBER	
ADDRESS		CITY		STATE ZIP CODE	
P O Box 302		Burlington,		Wa. 98233	
GRANTEE					
NAME					
same as grantor					
I DO SOLEMNLY ATTEST UNDER PENALTY OF PERJURY THAT I / WE AM/ARE THE REGISTERED OWNER(S) OF THIS VEHICLE AND THIS INFORMATION IS ACCURATE:					
Signature of Registered Owner and Title, IF APPLICABLE					
Signature of Additional Registered Owner and Title, IF APPLICABLE					
NOTARIZATION/CERTIFICATION FOR REGISTERED OWNER(S) SIGNATURE					
NOTARY SEAL OR STAMP		State of Washington Skagit		Signed or attested before me on 7-9-03	
		by Philip M. Dan		Signature	
		PRINT NAME OF REGISTERED OWNER		NOTARY OR AGENT	
		by		K. FRANEY	
		PRINT NAME OF REGISTERED OWNER		PRINTED NAME OF NOTARY	
Title		Notary		AND: County/Office No. OR Dealer No. OR 11-02-06	
DEALERSHIP POSITION/AGENT/NOTARY				Notary Expiration Date	
4 TITLE COMPANY CERTIFICATION					
I certify that the legal description of the land and ownership is true and correct per the real property records.					
NAME (TYPED OR PRINTED)		TITLE COMPANY / PHONE NUMBER			
SIGNATURE / POSITION		DATE			
Finalize this application with a Licensing Agent within 10 calendar days of the date Title Company Representative signs.					
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.					
NAME (TYPED OR PRINTED)		BLDG PERMIT OFFICE/PHONE #		BLDG PERMIT #	
Charles P. O'Hara		360-466-7280		02-BP-4	
SIGNATURE / POSITION		DATE			
		7/10/03			
Planning Director					

6 SIGNATURE OF LEGAL OWNER

SIGNATURE OF LEGAL OWNER INDICATES CONSENT FOR ELIMINATION OF TITLE / REMOVAL FROM REAL PROPERTY.

Signature of Legal Owner and Title, IF APPLICABLE

Signature of Additional Legal Owner and Title, IF APPLICABLE

**NOTARIZATION/CERTIFICATION FOR LEGAL OWNER(S) SIGNATURE**State of Washington
County of SKAGITSigned or attested
before me on 5-13-03by WINDY ISLAND BANK
Richard E. Thompson
PRINT NAME OF LEGAL OWNERSignature K. Franey
NOTARY OF AGENT
PRINTED NAME OF NOTARYby
PRINT NAME OF LEGAL OWNERTitle
DEALERSHIP POSITION/AGENT/NOTARYAND: County/Office No. OR
Dealer No. OR 11-02-06
Notary Expiration Date**7 LAND DESCRIPTION (A legal description of the land can be obtained from the local County Assessor's**The Northwest $\frac{1}{4}$ of the Northwest $\frac{1}{4}$ of the Southwest $\frac{1}{4}$ of the Northwest $\frac{1}{4}$ of Section 35, Township 34 North, Range 2 East, W.M.TOGETHER WITH a non-exclusive permanent perpetual easement for road and utilities right-of-way for the purpose of construction, operation and maintenance of a private use road in order to grade, level, fill, drain, pave, build, maintain, repair, and widen a private use road over, across in and upon the East 20 feet of the Southwest $\frac{1}{4}$ of the Northwest $\frac{1}{4}$ of the Southwest $\frac{1}{4}$ of the NW $\frac{1}{4}$ of said Section 35, and over the East 20 feet of the West $\frac{1}{2}$ of the SW $\frac{1}{4}$ of the SW $\frac{1}{4}$ of the NW $\frac{1}{4}$ of said Section 35.**8 DEALER'S REPORT OF SALE** Situate in the County of Skagit, State of Wash.I CERTIFY THAT THIS INFORMATION IS CORRECT. THE VEHICLE IS CLEAR OF ENCUMBRANCES EXCEPT AS SHOWN.
ANY REQUIRED SALES TAX HAS BEEN COLLECTED.

DEALER NAME (TYPED OR PRINTED)

SHOWCASE HOMES

WA DEALER NUMBER

4611

DATE OF SALE

3/03

PURCHASE PRICE

130,174

TAX JURISDICTION/TAX RATE

Pierce Exempt

DEALER'S AUTHORIZED SIGNATURE

[Signature]

☒ **USE TAX EXEMPT** Sale to a Certified Tribal member on the reservation (attach notarized statement of delivery).**9 COUNTY AUDITOR/AGENT LICENSING OFFICE APPROVAL: (Not for use by Subagents)**

I certify that the above application appears to have been completed correctly, and the applicant has sufficient documentation to proceed with the recording of this form.

NAME (TYPED OR PRINTED)

PEGGY A. RIEDELL GRAHAM

COUNTY OFFICE/VFS OPERATOR NUMBER

89-01-04

SIGNATURE

[Signature]

DATE

7/16/03

10 TITLE FEES

FILING FEE

APPLICATION

MOBILE HOME FEE

ELIMINATION FEE

USE TAX

SUBAGENT FEES

TOTAL FEES & TAX

IMPORTANT:

Once the application has been approved by the County Auditor / Vehicle Licensing Office, take your application form to the County Recording Office. Retain proof of the recording fees paid. If the Recording Office retains your original application form, obtain a certified copy of the recorded form.

APPLICANTS:

Once recorded, you must return to a Vehicle Licensing office to file the Manufactured Home Application, paying all required fees. Vehicle licensing subagents charge a service fee.

For full instructions on completing this form for Title Elimination, Removal from Real Property or Transfer in Location, see form TD-420-730, Manufactured Home Application Instructions.

The Department of Licensing has a policy of providing equal access to its services.
If you need special accommodation, please call (360) 902-3600 or TTY (360) 664-8885.200307160020
Skagit County Auditor