

COVER SHEET

Skagit County Auditor
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RETURN TO:	
Skagit State Bank	
PO Box 285	
Burlington WA 98233	
	CO. T. SCHALLE OF BUILDING
DOCUMENT TITLE(S) (or transactions contained herein):	LAND TITLE COMPANY OF SKAGIT COUNTY
Consent To Assignment of Lease For	Security Purposes
REFERENCE NUMBER(S) OF DOCUMENTS ASSIGNED	OR RELEASED:
GRANTOR(S) (Last name, first name and initials):	[] ADDITIONAL REFERENCE NUMBERS ON PAGE OF DOCUMENT.
1. Thomas E & Danielle L Palmer (Tena	" nt)
2. Dept of Natural Resources	
3.	
4.	
	ADDITIONAL NAMES ON PAGE OF DOCUMENT.
GRANTEE(S) (Last name, first name and initials):	
1. Skagit State Bank (Lender)	
2,	
3.	
4.	
1	ADDITIONAL NAMES ON PAGEOF DOCUMENT.
LEGAL DESCRIPTION (Abbreviated: i.e., lot, block, plat or q	
Tr 7 Plat 18, LaConner Tideland &	Ptn of Harbor Area Tr 2 Map of LaConner
,	
. 1	ADDITIONAL LEGAL(S) ON PAGE OF DOCUMENT.
ASSESSOR'S PARCEL/TAX I.D. NUMBER: 4 1290 18007	0102; 41290180070003; 41230240000004
•	
TAX PARCEL NUMBER(S) FOR ADDITIONAL	LEGAL(S) ON PAGE OF DOCUMENT.

DEPARTMENT OF NATURAL RESOURCES DOUG SUTHERLAND, Commissioner of Public Lands Olympia, Washington 98504

CONSENT TO ASSIGNMENT OF LEASE FOR SECURITY PURPOSES

Agreement No. 22-002695

THIS CONSENT is made by and between the STATE OF WASHINGTON, acting through the Department of Natural Resources ("the State"), and THOMAS E. and DANIELLE L. PALMER, husband and wife, and SKAGIT STATE BANK, a Washington Corporation.

BACKGROUND

- A. Tenant entered into a lease, known as Lease No. 22-002695, dated the 25th day of June, 1986, (the "Lease"), with the STATE OF WASHINGTON, acting through the Department of Natural Resources, as landlord ("State").
- B. Lender has agreed to make a loan to Tenant in the amount of Eight Hundred Seventy Thousand Dollars (\$870,000.) (the "Loan"). Part of the security for payment of the Loan is an assignment of the Lease. The Lease prohibits such an assignment without State's consent. State is willing to give its consent based upon the assurances and agreements made in this Agreement.

Therefore, the parties agree as follows:

SECTION 1 TENANT'S REPRESENTATIONS

Tenant represents and warrants to State and to Lender that (i) the Lease is in full force and effect, (ii) Tenant is not in default or breach of the Lease, (iii) Tenant has no knowledge of any claims, offsets or defenses under the Lease or against State, (iv) the rents due subsequent to the assignment have not been paid in advance, (v) to the best of its knowledge, the property which is described in the Lease is in full compliance with all applicable federal, state, and local governmental permits, rules, ordinances, and laws, and (vi) the Lease, a copy of which is attached, represents the entire agreement between State and Tenant and has not been modified or amended.

SECTION 2 STATE CONSENTS TO THE ASSIGNMENT OF LENDER

In the event of foreclosure of the Lender's security interest or delivery of an assignment of lease in lieu of foreclosure and upon Lender notifying State of the completion of such foreclosure or assignment in lieu of foreclosure, the Lease shall continue in full force and effect as a direct lease between Lender and State. Lender shall be fully liable for all obligations of Tenant under the Lease.

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The notice to State shall specifically confirm that Lender has acquired Tenant's interest in the Lease and that it is assuming the Tenant's obligations under the Lease, including curing and prior defaults. Prior to such foreclosure or assignment and notification as set forth above, Lender shall not be liable for any of the obligations of Tenant under the Lease. This Consent shall not apply to any assignee of Lender or any purchaser of Tenant's interest other than Lender.

SECTION 3 NOTIFICATION OF DEFAULT

State will exercise a good faith effort to send to Lender a copy of any notices of default it issues to Tenant. Failure to provide notices to Lender shall not relieve Tenant of its obligations under the Lease nor extend the time in which Tenant has the right to cure the default. State grants to Lender the same time to cure any default as is provided to Tenant under the Lease. This time to cure shall commence upon State's provision of notice of the default to Lender. If Tenant's interest has been terminated because of the default before Lender has had an opportunity to cure the default, then State will grant Lender an option to enter into a new Lease on the same terms and conditions provided Lender cures the default of Tenant within the time permitted in the Lease.

SECTION 4 COLLECTION ON BONDS

If Tenant defaults on the Lease, State reserves the right to collect on any bonds posted by lender for the benefit of State. Lender acknowledges that its interest in the bonds are inferior to those of State. Lender will post a new bond in favor of State in accordance with the terms of the Lease if it acquires Tenant's interest as a result of a foreclosure or assignment in lieu of foreclosure.

SECTION 5 NOTICE

Any notice to Lender shall be to the following address or other address as may be designated by Lender in writing to State and shall be deemed to have been given on the date delivered in the case of personal delivery, or if mailed, three (3) days after the postmark thereof:

> Skagit State Bank 301 East Fairhaven Avenue Burlington, Washington 98233

SECTION 6 CONSENT OF LENDER

No agreement between State and Tenant modifying, canceling, or surrendering the Lease shall be effective without the prior written consent of Lender.

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SECTION 7 RATIFICATION OF LEASE

THIS AGREEMENT requires the signature of all parties and is executed as of the date of the last signature below.

TENANT:

THOMAS E. PALMER and DANIELLE L. PALMER Husband and Wife

JA 1 105

2005

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THOMAS E. PALMER

yn Dated: FEB - 10

, 20*03*

DANIELLE L. PALMER

Address: PO Box 599

LaConner, WA 98257

Phone:

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360-466-3147

SKAGIT COUNTY WASHINGTON REAL ESTATE EXCISE TAX

JUL 0 1 2003

Amount Para 3 Skagit Co. Treasurer

Ву

Deputy

LENDER:

SKAGIT STATE BANK a Washington Corporation

Dated: 6 0 , 2003

JAMES BISHOP

Title:

By:

Co-CEO

Address: 301 E. Fairhaven Avenue

Burlington, WA 98233

Phone: 360-755-0411

STATE OF WASHINGTON DEPARTMENT OF NATURAL RESOURCES

Dated: <u>6 - 16</u>, 20<u>03</u>

By:

DAVID ROBERTS

Title:

Aquatic Lands Assistant Region Manager

Address:

919 N. Township St.

Sedro Woolley, WA 98284

Phone:

360-856-3500

Approval as to form this 1st day of June, 1998 Michael S. Grossmann Assistant Attorney General



Skagit County Auditor

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STATE OF WASHINGTON)

SS.):

COUNTY OF SKAGIT

Legrify that I know or have satisfactory evidence that DAVID ROBERTS is the person who appeared before me, and is the Aquatic Lands Assistant Region Manager of the STATE OF WASHINGTON DEPARTMENT OF NATURAL RESOURCES. I further certify that said person acknowledged the foregoing to be the free and voluntary act of the STATE OF WASHINGTON DEPARTMENT OF NATURAL RESOURCES for the uses and purposes mentioned in the instrument, and on oath stated that he is duly authorized to execute and acknowledge said instrument.

DATED: June 16,



(Type/Print Name)

Notary Public in and for the State of

Washington residing at:

My Commission Expires: Y

STATE OF WASHINGTON)

SS.

)

COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that JAMES BISHOP is the person who appeared before me, and is the Co-CEO of SKAGIT STATE BANK ("Lender"). I further certify that said person acknowledged the foregoing instrument to be the free and voluntary act of the Tenant for the uses and purposes mentioned in the instrument, and on oath state that he is duly authorized to execute and acknowledge said instrument.

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DATED:

PUBLIC OF WAS

(Type/Print Name)

Notary Public in and for the State of Washington residing at: Cirar lake

My Commission Expires: 20105

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STATE OF WASHINGTON)

ss.

COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that THOMAS E. PALMER is the person who appeared before me. I further certify that said person acknowledge the foregoing instrument to be his free and voluntary act for the uses and purposes mentioned in the instrument

DATED: Febtuary 10, 2003

PUBLIC 11-1-2005 OF WASHINGTON

EARL FY ANGEVINE

(Type/Print Name)

Notary Public in and for the State of Washington residing at Mount Vernou

My Commission Expires 11-1-05

STATE OF WASHINGTON)

ss.

COUNTY OF SKAGIT

I certify that I know or have satisfactory evidence that DANIELLE L. PALMER is the person who appeared before me. I further certify that said person acknowledge the foregoing instrument to be her free and voluntary act for the uses and purposes mentioned in the instrument

DATED: February 10, 2003

PUBLIC 11-1-2005 OF WASHING

EARL F. ANGEVINE

(Type/Print Name)

Notary Public in and for the State of Washington residing at Mount Vernon

My Commission Expires 11-1-0.5

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