



200311170137

Skagit County Auditor

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Recording Requested by:  
Wells Fargo Bank  
When Recorded Return to: Fidelity National LPS  
P. O. BOX 19523  
Irvine, CA 92623-9523  
Code: WFD

State of Washington

Space Above This Line For Recording Data

REFERENCE # 20032877000582 ACCOUNT #: 0651-651-2119528-1998

**SHORT FORM DEED OF TRUST**

(With Future Advance Clause)

1. **DATE AND PARTIES.** The date of this Short Deed of Trust ("Security Instrument") is 10/31/2003 and the parties are as follows:

TRUSTOR ("Grantor"):  
PETER HIBBARD, AN UNMARRIED MAN, AS HIS SEPARATE PROPERTY

whose address is: 1501 7TH ST ANACORTES, WA, 98221

TRUSTEE: **Wells Fargo Financial National Bank**  
c/o Specialize Service  
401 West 24th Street, National City, CA 91950

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A.  
P. O. BOX 31557  
BILLINGS, MT 59107

2. **CONVEYANCE.** For good and valuable consideration, the receipt and sufficiency of which is acknowledged, and to secure the Secured Debt (defined below) and Grantor's performance under this Security Instrument, Grantor irrevocably grants, conveys and sells to Trustee, in trust for the benefit of Lender, with power of sale, all of that certain real property located in the County of SKAGIT, State of Washington, described as follows:

THE FOLLOWING DESCRIBED REAL PROPERTY LOCATED IN THE COUNTY OF SKAGIT, STATE OF WASHINGTON, DESCRIBED AS FOLLOWS LOTS 1 THROUGH 3, INCLUSIVE, BLOCK 132, MAP OF THE CITY OF ANACORTES, SKAGIT COUNTY, WASHINGTON, AS PER PLAT RECORDED IN VOLUME 2 OF PLATS, PAGE 4, RECORDS OF SKAGIT COUNTY, WASHINGTON. SITUATE IN THE CITY OF ANACORTES, COUNTY OF SKAGIT, STATE OF WASHINGTON.

with the address of 1501 7TH ST ANACORTES, WA 982211813 and parcel number of P55852 together with all rights, easements, appurtenances, royalties, mineral rights, oil and gas rights, all water and riparian rights, ditches, and water stock and all existing and future improvements, structures, fixtures, and replacements that may now, or at any time in the future, be part of the real estate described above.

- 3. MAXIMUM OBLIGATION LIMIT AND SECURED DEBT.** The total amount which this Security Instrument will secure shall not exceed \$35,000.00 together with all interest thereby accruing, as set forth in the promissory note, revolving line of credit agreement, contract, guaranty or other evidence of debt ("Secured Debt") of even date herewith, and all amendments, extensions, modifications, renewals or other documents which are incorporated by reference into this Security Instrument, now or in the future. The maturity date of the Secured Debt is 10/31/2043
- 4. MASTER FORM DEED OF TRUST.** By the delivery and execution of this Security Instrument, Grantor Agrees that all provisions and sections of the Master Form Deed of Trust ("Master Form"), inclusive, dated February 1, 1997 and recorded on February 6, 1997 as Auditor's File Number 9702060051 in Book 1626 at Page 0614 of the Official Records in the Office of the Auditor of SKAGIT County, State of Washington, are hereby incorporated into, and shall govern, this Security Instrument.
- 5. USE OF PROPERTY.** The property subject to this Security Instrument is not used principally for agricultural or farming purposes.

**RIDERS.** If checked, the following are applicable to this Security Instrument. The covenants and agreements of each of the riders checked below are incorporated into and supplement and amend the terms of this Security Instrument.

- Third Party Rider  
 Leasehold Rider  
 Other \_\_\_\_\_

**SIGNATURES:** By signing below, Grantor agrees to perform all covenants and duties as set forth in this Security Instrument. Grantor also acknowledges receipt of a copy of this document and a copy of the provisions contained in the previously recorded Master Form (the Deed of Trust-Bank/Customer Copy).

----- FOR CLARIFICATION PURPOSES ONLY -----

_____	Grantor	_____	Date
PETER HIBBARD			
_____	Grantor	_____	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date
_____	Grantor	_____	Date



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**ACKNOWLEDGMENT:**

(Individual)  
STATE OF \_\_\_\_\_, COUNTY OF \_\_\_\_\_ } ss.  
I hereby certify that I know or have satisfactory evidence that \_\_\_\_\_ is/are the person(s) who appeared before me and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: \_\_\_\_\_

(Signature) \_\_\_\_\_

(Print name and include title) \_\_\_\_\_

My Appointment expires: \_\_\_\_\_

**For clarification purposes, I declare under penalty of perjury, 11/05/03, that this is an exact copy of the original document to which it is attached.**

(Affix Seal or Stamp)  
**WENDI VAANDERING** *Wendi Vaandering*  
**WASHINGTON COUNTY, OREGON**


3. **MAXIMUM OBLIGATION LIMIT AND SECURED DEBT.** The total amount which this Security Instrument will secure shall not exceed \$35,000.00 together with all interest thereby accruing, as set forth in the promissory note, revolving line of credit agreement, contract, guaranty or other evidence of debt ("Secured Debt") of even date herewith, and all amendments, extensions, modifications, renewals or other documents which are incorporated by reference into this Security Instrument, now or in the future. The maturity date of the Secured Debt is 10/31/2043
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 Other

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Peter Hubbard Grantor 10-31-03 Date  
 \_\_\_\_\_ Grantor \_\_\_\_\_ Date  
 \_\_\_\_\_ Grantor \_\_\_\_\_ Date  
 \_\_\_\_\_ Grantor \_\_\_\_\_ Date  
 \_\_\_\_\_ Grantor \_\_\_\_\_ Date  
 \_\_\_\_\_ Grantor \_\_\_\_\_ Date

  
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**ACKNOWLEDGMENT:**

(Individual)  
 STATE OF Washington, COUNTY OF Skagit } ss.  
 I hereby certify that I know or have satisfactory evidence that Peter Hubbard is/are the person(s) who appeared before me and said person(s) acknowledged that he/she/they signed this instrument and acknowledged it to be his/her/their free and voluntary act for the uses and purposes mentioned in the instrument.

Dated: 10-31-03  
Myalia Ann Rowland  
 (Signature)  
Myalia Ann Rowland  
 (Print name and include title)  
 My Appointment expires: July 12, 2005



**ILLEGIBLE NOTARY SEAL DECLARATION**

I CERTIFY UNDER PENALTY OF PERJURY THAT THE NOTARY SEAL ON THE DOCUMENT TO WHICH THIS STATEMENT IS ATTACHED READS AS FOLLOWS:

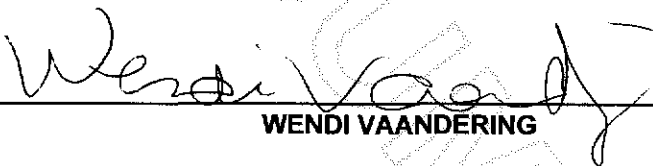
Name of Notary: MYALIA ANN ROWLAND

Notary Commission Number: N/A

Date Commission Expires: July 12, 2005

Date and Place of Notary Execution: October 31, 2003 SKAGIT County, Washington

Date & Place of This Execution: November 5, 2003 Washington County, OR

  
WENDI VAANDERING  
Wells Fargo Bank, N A

REVISED 01/17/02

20032877000582 hibbard



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