



201509110121

Skagit County Auditor

\$75.00

9/11/2015 Page

1 of

4 3:57PM

When recorded return to:
Samuel E. Riley and Sarah E. Riley
23126 Buchanan St
Mount Vernon, WA 98273

Filed for record at the request of:



CHICAGO TITLE
COMPANY OF WASHINGTON

425 Commercial St
Mount Vernon, WA 98273
Escrow No.: 620024764

CHICAGO TITLE
620024764

STATUTORY WARRANTY DEED

THE GRANTOR(S) Bryan Timothy DeMaranville and Melissa McGregor DeMaranville, husband and wife

for and in consideration of Ten And No/100 Dollars (\$10.00) , and other valuable consideration in hand paid, conveys, and warrants to Samuel E. Riley and Sarah E. Riley, a married couple

the following described real estate, situated in the County of Skagit, State of Washington:

PARCEL A:

Lot 12, Block 4, BINGHAM ACREAGE, SKAGIT COUNTY, WASHINGTON, according to the plat thereof recorded in Volume 4 of Plats, page 24, records of Skagit County, Washington;

TOGETHER WITH the North Half of that certain 40 foot unopened County right-of-way as vacated by Order Vacating County right-of-way recorded November 15, 2001, under Auditor's File No. 200111150009, records of Skagit County, Washington, adjacent thereto, which would attach to said premises by operation of law.

Situated in Skagit County, Washington

PARCEL B:

A non-exclusive easement for ingress, egress and utilities as granted in Declaration of Easement recorded June 14, 2000, under Auditor's File No. 200005140193, records of Skagit County, Washington.

Situated in Skagit County, Washington

Abbreviated Legal: (Required if full legal not inserted above.)

Tax Parcel Number(s): P62207 / 3864-004-012-0007

Subject to: Conditions, covenants, restrictions and easements of record as more fully described in Chicago Title Company Order 620024764, Schedule B, Special Exceptions, which are attached hereto and made a part hereof.

Dated: September 4, 2015

Bryan Timothy DeMaranville

Melissa McGregor DeMaranville

2015 3699
SKAGIT COUNTY WASHINGTON
REAL ESTATE EXCISE TAX

SEP 11 2015

Amount Paid \$ 8460.00
By Skagit Co. Treasurer
Deputy
MF

STATUTORY WARRANTY DEED
(continued)

State of _____
_____ of _____

I 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 this instrument.

Dated: _____

Name: _____
Notary Public in and for the State of _____
Residing at: _____
My appointment expires: _____

See attached certificate

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of Tulare)

On 9-9-15 before me, J. M. Vetterick Notary Public
Date Here Insert Name and Title of the Officer

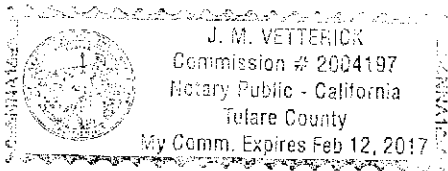
personally appeared Brian Timothy De Maranville and
Name(s) of Signer(s)

Melissa McGregor De Maranville

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature [Signature]
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Statutory Warranty Deed Document Date: 9-9-15
Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

Signer's Name: _____
 Corporate Officer — Title(s): _____
 Partner — Limited General
 Individual Attorney in Fact
 Trustee Guardian or Conservator
 Other: _____
Signer Is Representing: _____

SCHEDULE "B"

SPECIAL EXCEPTIONS

1. **Declaration of Easements, Covenants and Road Maintenance Agreement, including the terms and conditions thereof**

Recording Date: June 15, 2000
Recording No.: 200006150112 (being a re-recording of 200006140193)

Modified by:
Recording Date: August 15, 2001
Recording No.: 200108150113

2. **Covenants, conditions and restrictions but omitting any covenants or restrictions, if any, including but not limited to those based upon race, color, religion, sex, sexual orientation, familial status, marital status, disability, handicap, national origin, ancestry, source of income, gender, gender identity, gender expression, medical condition or genetic information, as set forth in applicable state or federal laws, except to the extent that said covenant or restriction is permitted by applicable law, as set forth in the document**

Recording Date: June 13, 2002
Recording No.: 200206130078

Said document being a re-recording of Auditor's File No. 200205290097

3. **Lot of Record Certification**

Recording Date: December 7, 2005
Recording No.: 200512070042

4. **Agreement for Management Services of a Glendon On-site Sewage System and the terms and conditions thereof**

Recording Date: December 11, 2006
Recording No.: 200612110167

5. **Public and private easements, if any, over vacated portion of said premises.**
6. **Terms and conditions of the easement set forth in Parcel B of Exhibit "A".**
7. **City, county or local improvement district assessments, if any.**

General and special taxes and charges, payable February 15; delinquent if first half unpaid on May 1 or if second half unpaid on November 1 of the tax year.