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# **ACCOMMODATION RECORDING**

DEED OF TRUST

Grantor(s) MICHAEL T LYNCH AND TINA M LYNCH, HUSBAND AND WIFE

ORG VSTG:

Trustee: Wess forgo francial National Bange

Grantee(s) Wells Fargo Bank, N.A., 101 North Phillips Avenue, Sioux Falls, SD 57104

Legal Description Lo+42, Plat of West View

Assessor's Property Tax Parcel or Account Number P120535

Reference Numbers of Documents Assigned or Released

WADEED – short (06/2002) CDPv.1

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## DEED OF TRUST

Grantor(s) MICHAEL T LYNCH AND TINA M LYNCH, HUSBAND AND WIFE ORG VSTG:

Grantee(s) Wells Fargo Bank, N.A., 101 North Phillips Avenue, Sioux Falls, SD 57104

**Legal Description** 

Assessor's Property Tax Parcel or Account Number

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Prepared by:
Wells Fargo Bank, N.A.
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State of Washington
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-Space Above This Line For Recording Data

Account number: 650-650-1967256-1XXX

#### SHORT FORM DEED OF TRUST

(With Future Advance Clause)

1. DATE AND PARTIES. The date of this Short Deed of Trust ("Security Instrument") is MAY 31, 2006 and the parties are as follows:

TRUSTOR ("Grantor"): MICHAEL T. LYNCH AND TINA M LYNCH, HUSBAND AND WIFE ORG VSTG: whose address is: 278 ALDERSON PLACE, BURLINGTON, WASHINGTON 98233-0000

TRUSTEE: Wells Fargo Financial National Bank, 2324 Overland Ave, Billings, MT 59102

BENEFICIARY ("Lender"): Wells Fargo Bank, N.A., 101 North Phillips Avenue, Sioux Falls, SD 57104

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:

Assessor's Property Tax Parcel Account Number(s):

This deed of trust is 2nd and subject to a deed of trust securing the note in the amount of \$223,200.00 recording concurrently herewith.

with the address of 267 ALDERSON PLACE, BURLINGTON, WASHINGTON 98233-0000 and parcel number of \_ 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 \$55,800.00 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 May 31, 2046.

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- Agrees that all provisions and sections of the Master Form Deed of Trust ("Master Form"), inclusive, dated February 1, 1997, and recorded on 2/6/1997 as Auditor's File Number 9702060051 in Book 1626 at Page 614 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.
- 6. 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.

N/A	Third Party Ride	
N/A	Leasehold Rider	
N/A	Other: N/A	

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).

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Grantor MICHAEL T LYNCH	Date
Smamween	4/1/06
Grantor TINA M LYNCH	Date
Grantor	Date

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Grantor	Date
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Grantor	Date

### ACKNOWLEDGMENT:

(Individual)

STATE OF WASHINGTON, COUNTY OF SKAGIT ss.

I hereby certify that I know or have satisfactory evidence that

#### MICHAEL T LYNCH And TINA M LYNCH

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.

(Signature)

(Print name) NOTARY PURITY

My Appointment expires: 5714/07

(Affix Seal or Stamp)

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