



201802130015

Skagit County Auditor  
2/13/2018 Page

1 of

1

\$74.00

8:38AM

**UCC FINANCING STATEMENT**

FOLLOW INSTRUCTIONS

A. NAME & PHONE OF CONTACT AT FILER (optional)  
**Diana Norberg** (509) 327-9634

B. E-MAIL CONTACT AT FILER (optional)  
**dianan@upfservices.com**

C. SEND ACKNOWLEDGMENT TO: (Name and Address)

**Chronos Mortgage Solutions**  
**12410 E. Mirabeau Parkway, Ste 100**  
**Spokane Valley, WA 99216**

THE ABOVE SPACE IS FOR FILING OFFICE USE ONLY

1. DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 1b, leave all of item 1 blank, check here, and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

1a. ORGANIZATION'S NAME

OR 1b. INDIVIDUAL'S SURNAME  
**Zagelow**

FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
<b>David</b>		

1c. MAILING ADDRESS  
**17656 S. Skyridge Dr**

CITY	STATE	POSTAL CODE	COUNTRY
<b>Mount Vernon</b>	<b>WA</b>	<b>98274-</b>	<b>USA</b>

2. DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact full name; do not omit, modify, or abbreviate any part of the Debtor's name); if any part of the Individual Debtor's name will not fit in line 2b, leave all of item 2 blank, check here, and provide the Individual Debtor information in item 10 of the Financing Statement Addendum (Form UCC1Ad)

2a. ORGANIZATION'S NAME

OR 2b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

2c. MAILING ADDRESS

CITY	STATE	POSTAL CODE	COUNTRY
			<b>USA</b>

3. SECURED PARTY'S NAME (or NAME of TOTAL ASSIGNEE of ASSIGNOR SECURED PARTY): Provide only one secured party name (3a or 3b)

3a. ORGANIZATION'S NAME

**Puget Sound Cooperative Credit Union**

OR 3b. INDIVIDUAL'S SURNAME

FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX

3c. MAILING ADDRESS  
**600 108th Ave NE Suite #1035**

CITY	STATE	POSTAL CODE	COUNTRY
<b>Bellevue</b>	<b>WA</b>	<b>98004</b>	<b>USA</b>

4. COLLATERAL: This financing statement covers the following collateral:

**4.2KW SOLAR- 14 ITEK SOLAR MODULES, 7 BLUE FROG MICRO INVERTERS, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO THE ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 17656 S. SKYRIDGE DR, MOUNT VERNON, WA 98274 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).**

**LEGAL: LOT 2, PLAT OF SKYRIDGE DIV. NO. V, ACCORDING TO THE PLAT THEREOF RECORDED IN VOL. 14 OF PLATS, PAGE 9, TOGETHER WITH AN EASEMENT FOR INGRESS, EGRESS AND UTILITIES OVER TRACT A, PLAT OF SKYRIDGE DIVISION NO. V, ACCORDING TO THE PLAT THEREOF RECORDED IN VOL. 14 OF PLATS, PAGE 9, IN SKAGIT COUNTY, WASHINGTON.**

APN: P83200

5. Check only if applicable and check only one box: Collateral is held in a Trust (see UCC1Ad, item 17 and Instructions) being administered by a Decedent's Personal Representative

6a. Check only if applicable and check only one box:

Public-Finance Transaction    Manufactured-Home Transaction    A Debtor is a Transmitting Utility

6b. Check only if applicable and check only one box:

Agricultural Lien    Non-UCC Filing

7. ALTERNATE DESIGNATION (if applicable):

Lessee/Lessor    Consignee/Consignor    Seller/Buyer    Bailee/Bailor    Licensee/Licensee

8. OPTIONAL FILER REFERENCE DATA

**Chronos Tracking #4482124-38165**

Loan #

SBA Loan #