



201810090021

10/09/2018 09:41 AM Pages: 1 of 1 Fees: \$99.00
Skagit County Auditor

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

FIRST PERSONAL NAME

ADDITIONAL NAME(S)/INITIAL(S)

SUFFIX

CHASE

TRACEY

E

1c. MAILING ADDRESS

CITY

STATE POSTAL CODE

COUNTRY

470 Spring Ln

Sedro Woolley

WA 98284-

USA

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

USA

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

CITY

STATE POSTAL CODE

COUNTRY

600 108th Ave NE Suite #1035

Bellevue

WA 98004

USA

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

CARRIER GAS FURNACE, CARRIER AIR CONDITIONER, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 470 SPRING LANE, SEDRO WOOLLEY, WA 98284 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).

LEGAL: LOT 18, PLAT OF SPRING MEADOWS, DIVISION 1, ACCORDING TO THE PLAT THEREOF RECORDED IN VOLUME 17 OF PLATS, PAGES 65 AND 66, IN SKAGIT COUNTY, WASHINGTON.

APN: P114861

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 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/Licenser

8. OPTIONAL FILER REFERENCE DATA

Chronos Tracking #5125750-42045

Loan #

SBA Loan #