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Skagit County Auditor, WA

LICC FINANCING STATEMENT	
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FOLLOW INSTRUCTIONS	UCC FINANCING STATEMENT

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

DEBTOR'S NAME: Provide only one Debtor name (1a or 1b) (use exact name will not fit in line 1b, leave all of item 1 blank, check here and p			
1a. ORGANIZATION'S NAME			
OR 16. INDIVIDUAL'S SURNAME ARRINGTON	FIRST PERSONAL NAME MICHAEL	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
16. MAILING ADDRESS 21702 Little Mountain Rd	сіту Mount Vernon	STATE POSTAL CODE WA 98274	COUNTRY
DEBTOR'S NAME: Provide only one Debtor name (2a or 2b) (use exact name will not fit in line 2b, leave all of item 2 blank, check here—and p			
2a. ORGANIZATION'S NAME			
OR 26. INDIVIDUAL'S SURNAME ARRINGTON	FIRST PERSONAL NAME JUDITH	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
2c MAILING ADDRESS 21702 Little Mountain Rd	αιτγ Mount Vernon	STATE POSTAL CODE WA 98274	COUNTRY
3. SECURED PARTY'S NAME: (or NAME of TOTAL ASSIGNEE of		secured parly name (3a or 3b)	
OR 3b. INDIVIDUAL'S SURNAME	FIRST PERSONAL NAME	ADDITIONAL NAME(S)/INITIAL(S)	SUFFIX
3c MAILING ADDRESS 600 108th Ave NE Suite #1035	спү Bellevue	STATE POSTAL CODE WA 98004	COUNTRY

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

4.8KW SOLAR: 16 ITEK PANELS, 8 APS MICRO-INVERTERS, DAKIN DUCTLESS HEAT PUMP, ALONG WITH AFTER ACQUIRED FIXTURES PERTAINING TO ENERGY EFFICIENCY UPGRADES AT THE PROPERTY LOCATED AT: 21702 LITTLE MOUNTAIN RD, MOUNT VERNON, WA 98274 AS DOCUMENTED ON SUBSEQUENT LOAN DISBURSEMENT FORM(S).

LEGAL: TRACT 2 OF SKAGIT COUNTY SHORT PLAT NO. 2-89, APPROVED FEBRUARY 13, 1989 AND RECORDED FEBRUARY 14, 1989, UNDER AUDITOR'S FILE NO. 8902140025 IN VOLUME 8 OF SHORT PLAT, PAGE 108, BEING A PORTION OF THE EAST ½ OF SECTION 34, T34N, R4E, W.M., IN SKAGIT COUNTY, WASHINGTON.

APN: P29696

5. Check only if applicable and check only one box: Collateral isheld in a Trust (see UCC1Ad, item 17 and Instructions)being administered by a Deceden't Personal Representative							
6a. Check only if applicable and check only one box: Public-Finance Transaction Manufa	ctured-Home Transaction A Debtor is a Ti	rasmitting Utility	6b. Check <u>only</u> if applicable Agricultural Lien	and check <u>only</u> one box:			
7. ALTERNATE DESIGNATION (if applicable):	Lessee/Lessor Consignee/Consigno	r Seller/Buye	er Bailee/Bailor	Licensee/Licensor			
8. OPTIONAL FILER REFERENCE DATA Chronos Tracking #5531953-44110	Loan #		SBA Loan #				