202405310071

05/31/2024 02:01 PM Pages: 1 of 7 Fees: \$309.50 Skagit County Auditor

When Recorded Please Return To: LAWRENCE A. PIRKLE P.O. Box 1788 Mount Vernon, WA 98273

REVIEWED BY
SKAGIT COUNTY TREASURER
DEPUTY HOW Shows
DATE 5:31-24

DOCUMENT TITLE(S):

AFFIDAVIT OF SURVIVING SPOUSE FOR LACK OF PROBATE AND CLAIM OF EXEMPTION BASED UPON INHERITANCE OF REAL ESTATE

REFERENCE NUMBER(S):

N/A

GRANTOR:

GERALD W. BRODLAND

GRANTEE:

PUBLIC

LEGAL DESCRIPTION:

Tract 7 of that certain 5 Acre Parcel Subdivision No. 137-79, entitled "SAMISH HEIGHTS DIVISION NO. 3" approved June 22, 1979 and recorded June 22, 1979, under Auditor's File No. 7906220055, in Volume 3 of Short Plats, page 132, records of Skagit County, being a portion of Sections 35 and 36, Township 36 North, Range 4 East, W.M.

TOGETHER WITH those certain easements for ingress, egress, and utilities as contained in Declaration of Easements recorded under Auditor's File Nos. 7903150055 and 7903160074, records of Skagit County.

ALSO TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over and across Tract 10 of said Short Plat No. 137-79.

Situate in the County of Skagit, State of Washington.

P50697

AFFIDAVIT OF SURVIVING SPOUSE FOR LACK OF PROBATE AND CLAIM OF EXEMPTION BASED UPON INHERITANCE OF REAL ESTATE

| STATE OF WASHINGTON |) |
|---------------------|-----------|
| COUNTY OF SKAGIT |) ss) |

GERALD W. BRODLAND, being first duly sworn, deposes and says:

FIRST, that this Affidavit is for the purpose of supplying information pertaining to the Estate of DARLENE M. BRODLAND, deceased, and it is intended that the statements set forth herein (and hereto attached, if applicable), shall be considered representations of fact which may be relied upon by all persons dealing with the real property located in Skagit County, Washington, commonly known as 22828 Nature View Drive, Sedro Woolley, Washington 98284, and legally described as set forth on Exhibit "A" attached hereto and incorporated herein by this reference.

SECOND, I am the surviving spouse of DARLENE M. BRODLAND and we owned this property as husband and wife.

THIRD, that said Decedent passed away on March 5, 2021, in Skagit County, State of Washington. Decedent's original/certified Death Certificate is recorded separately, with a copy attached hereto as Exhibit "B" and incorporated herein by this reference.

FOURTH, that said Decedent executed no Wills, agreements to convey, conveyances, mortgages, deeds of trust, lien agreements or other instruments for the purpose of conveying or encumbering said land, any portion thereof, or any interest therein, other than those instruments which have been duly recorded in the office of the Auditors of said County, except as follows: NONE.

FIFTH, that the Estate of said Decedent at the date of death was in excess of its liabilities.

SIXTH, that all obligations of the Estate owing at the date of death of said Decedent have been paid in full, and all expenses of last sickness and for funeral services have been paid.

SEVENTH, that the following list comprises all of the heirs at law by whom said Decedent was survived.

Lack of Probate Affidavit - Page 1

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| <u>Name</u> | <u>Relationship</u> | <u>Age</u> |
|--|---------------------|------------|
| GERALD W. BRODLAND 22828 Nature View Drive Sedro Woolley, WA 98284 | Spouse | Legal |
| JUDY A. BRODLAND 22828 Nature View Drive Sedro Woolley, WA 98284 | Daughter | Legal |
| DEBRA A. HERRING P.O. Box 1044 Burlington, WA 98233 | Daughter | Legal |
| NANCY E. McKIERNAN 7501 Valley View Road Sedro Woolley, WA 98284 | Daughter | Legal |
| BARBARA I. BARKHURST 12131 Chinook Drive Burlington, WA 98233 | Daughter | Legal |
| RONALD W. BRODLAND (Deceased) | Son | n/a |
| CATHERINE L. HANSON 22049 Bulson Road Mount Vernon, WA 98274 | Stepdaughter | Legal |
| KAREN D. LEE 7538 Trowbridge Road SE Olympia, WA 98513 | Stepdaughter | Legal |
| MELISSA GIAIME 14124 59th Ave SE Everett, WA 98208 | Granddaughter | Legal |
| MINDY LAMPROS 69125 68th Ave Watervliet, MI 49098 | Granddaughter | Legal |

EIGHTH, I, GERALD W. BRODLAND, affirm that I am the sole and rightful heir to the property legally described above.

Lack of Probate Affidavit - Page 2

NINETH, that the transfer of this property is exempted from the real estate excise tax pursuant to WAC 458-61A-202(6)(h).

DATED this 28th day of May 2024.

CERALD W BRODI AND

STATE OF WASHINGTON) ss. COUNTY OF SKAGIT)

I certify that I know or have satisfactory evidence that GERALD W. BRODLAND is the individual who appeared before me and said individual acknowledged that he signed this instrument and acknowledged it to be his free and voluntary act for the uses and purposes mentioned in the instrument.

DATED this 28 day of May 2024.

NOTARY & M. LICENSE NO. 40836
PUBLIC
PT. 05-07-2027
OF WASHING

LAWRENCE A MRKLE

NOTARY PUBLIC in and for the

State of Washington,

Residing at Mount Vernon

My Commission Expires: <u>5/7/27</u>

EXHIBIT "A"

Assessor's Parcel Number: P50697 (360435-1-009-0705)

Tract 7 of that certain 5 Acre Parcel Subdivision No. 137-79, entitled "SAMISH HEIGHTS DIVISION NO. 3" approved June 22, 1979 and recorded June 22, 1979, under Auditor's File No. 7906220055, in Volume 3 of Short Plats, page 132, records of Skagit County, being a portion of Sections 35 and 36, Township 36 North, Range 4 East, W.M.

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ALSO TOGETHER WITH a non-exclusive easement for ingress, egress and utilities over and across Tract 10 of said Short Plat No. 137-79.

Situate in the County of Skagit, State of Washington.

TOGETHER WITH AND SUBJECT TO: All covenants, conditions, restrictions, reservations, agreements, easements and assessments of record, if any.

CERTIFICATE OF DEATH



DATE ISSUED: 03/15/2021 FEE NUMBER:

CERTIFICATE NUMBER: 2021-011901

FIRST AND MIDDLE NAME(S): DARLENE MILDRED LAST NAME(S): BRODLAND ...

COUNTY OF DEATH: SKAGIT DATE OF DEATH: MARCH 05, 2021 HOUR OF DEATH: ,07:35 PM SEX: FEMALE

SOCIAL SECURITY NUMBER

HISPANIC ORIGIN: NO, NOT SPANISH/HISPANIC/LATINO

RACE: WHITE

BIRTH DATE BIRTHPLACE: LAKE MCMURRAY, WA

MARITAL STATUS: MARRIED SURVIVING SPOUSE: 'GERALD WALTER BRODLAND

OCCUPATION: HOMEMAKER INDUSTRY: OWN HOME EDUCATION: 8TH GRADE OR LESS US ARMED FORÇES: NO

INFORMANT: DEBRA HERRING RELATIONSHIP: DAUGHTER

ADDRESS: P.O. BOX 1044; BURLINGTON, WA 98233

CAUSE OF DEATH:

. A: HIGH GRADE SMALL BOWEL OBSTRUCTION INTERVAL: 5 DAYS :

. 'C: .

INTERVAL:

OTHER CONDITIONS CONTRIBUTING TO DEATH: LEWY BODY DEMENTIA

DATE OF INJURY: HOUR OF INJURY: INJURY AT WORK: PLACE OF INJURY:

LOCATION OF INJURY:

CITY, STATE, ZIP: `COUNTY:

DESCRIBE HOW INJURY OCCURRED:

TRANSPORTATION INJURY, SPECIFY: NOT APPLICABLE

PLACE OF DEATH: EMERGENCY ROOM FACILITY OR ADDRESS: UNITED GENERAL HOSPITAL CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284

*RESIDENCE STREET: 22828 NATURE VIEW DRIVE CITY, STATE, ZIP: SEDRO WOOLLEY, WA 98284 INSIDE CITY LIMITS: UNKNOWN COUNTY: SKAGIT TRIBAL RESERVATION: NOT APPLICABLE LENGTH OF TIME AT RESIDENCE: 30 YEARS

FATHER: CLARENCE BRADBURN MOTHER: DORATHA

METHOD OF DISPOSITION: CREMATION PLACE OF DISPOSITION: MOUNT VERNON CREMATORY

CITY, STATE: MOUNT VERNON, WASHINGTON DISPOSITION DATE: MARCH 12, 2021

FUNERAL FACILITY: KERN FUNERAL HOME

ADDRESS: 1122 S. 3RD STREET CITY, STATE, ZIP: MT. VERNON, WASHINGTON 98273 FUNERAL DIRECTOR: DANIEL G LA PLAUNT

MANNER OF DEATH: NATURAL AUTOPSY: NO WERE AUTOPSY FINDINGS AVAILABLE TO COMPLETE CAUSE OF DEATH: NOT APPLICABLE DID TOBACCO USE CONTRIBUTE TO DEATH: NO ... PREGNANCY STATUS IF FEMALE: NO RESPONSE

CERTIFIER NAME: SONG HONG, MD TITLE: PHYSICIAN CERTIFIER ADDRESS: 2000 HOSPITAL DRIVE CITY, STATE, ZIP: SEDRO WOOLLEY, WASHINGTON 98284 DATE SIGNED: MARCH 09, 2021

CASE RÈFERRED TO ME/CORONER: NO FILE NUMBER: NOT APPLICABLE ATTENDING PHYSICIAN: SONG HONG, PHYSICIAN

LOCAL DEPUTY REGISTRAR: BELEN MARTINEZ DATE RECEIVED: MARCH 11, 2021

202405310071

05/31/2024 02/01/toPMerRage Hearth Statistics Affidavit for Correction P.O. Box 47814 Olympia, WA 98504-7814 This is a legal document. Complete in ink and do not alter. 360-236-4300 STATE OFFICE USE ONLY State File Number Fee Number Date Affidavit Number Required information must match current information on record Record Type: Birth Death Marriage Dissolution (Divorce) 1. Name on Record: 2. Date of Event: 3. Place of Event: First Middle Last MM/DD/YYYY (City or County) 4. Father/Parent Full Birth Name (Spouse A for Marriage or Dissolution) 5. Mother/Parent Full Birth Name (Spouse B for Marriage or Dissolution) Middle Last/Maiden Middle Last/Maiden 6. Name of Person Requesting Correction: Relationship to ☐ Self ☐ Guardian ☐ Informant ☐ Hospital Person on Record: Parent(s) ☐ Funeral Director Other (specify) Return Mailing Address: PO Box or Street Address City State Zio Telephone Number: Email Address: Use the section below for requesting any changes on the record. The record is incorrect or incomplete as follows: The record currently shows: The true fact is: R 10. 11. 12. 13. I declare under penalty of perjury under the laws of the State of Washington that the forgoing is true and correct. 14a. Signature: 14b. Signature of 2nd parent (if required): Printed name: Printed name: Date: Date: INSTRUCTIONS - go to www.doh.wa.gov for more information Required proof documentation must be submitted with the affidavit and include full name and birth date. Examples of proof documentation include: Birth/Marriage/Divorce record Social Security Numident Report Military record (DD-214) School transcripts Certificate of Naturalization Hospital/medical record Copy of Passport / Enhanced ID Green/Permanent Resident card (I-551) You cannot use a Driver's license, Social Security card, or hospital decorative birth certificate as proof documentation. Birth Certificates 1. Only a parent(s), legal guardian (if the child is under 18), or the named individual (if 18 or older) may change the birth certificate. The proof(s) must match the asserted fact(s). For example, if the affidavit says the name should be Mary Ann Doe, the proof must show the name to be Proof documentation must be five or more years old or established within five years of birth. This affidavit cannot be used to add a parent to a birth certificate (use Acknowledgment of Parentage form DOH 422-159). Child under 18 Adult (18 years or older) If legal guardian(s), include certified court order proving guardianship. Only the adult can change his or her birth certificate. Up to age one or up to one year following the filing of an Acknowledgement If the first or middle name is missing, three pieces of proof documentation are of Parentage form, last name can be changed once to either parents' name required. on certificate (can be any combination of the first, middle or last names); If the first, middle and/or last name is misspelled, or month and/or day of birth thereafter, a court order is required to change the last name. is incorrect, two pieces of proof documentation are required. No proof is required to change the first or middle name.* To correct parent's birth date, place of birth, or name, one proof documentation To correct parent's information, one proof documentation is required. is required. To correct the sex of the child, one proof documentation from a medical provider is required. To change any part of the name of a child using this form, signatures from both parents listed on the certificate are required. If one parent is deceased, submit a death certificate with request. Only the informant may change the non-medical information without proof documentation. The funeral director, executors/administrators, or a family

- member may change the non-medical information with proof documentation. Family members are spouse or registered domestic partner, parent, sibling, or adult child or stepchild. Marital status requires a certified court order if someone other than the informant is requesting the change.
- The medical information (cause of death) may be changed only by the certifying physician or the coroner/medical examiner.

Marriage/Dissolution (Divorce) Certificates

- Personal facts (minor spelling changes in name, date or place of birth, or residence) may be changed by the person with one piece of proof documentation. To change the date or place of marriage or dissolution, the officiant (marriage) or clerk of court (dissolution) must complete and submit the affidavit.

MAR 15 2021

Skagit County Health Department Howard Leibrand M.D., Health Officer

Certificate not valid unless the Seal of the State of Washington changes color when heat applied.