

REAL ESTATE EXCISE TAX AFFIDAVIT
 CHAPTER 82.45 RCW - CHAPTER 458-61A WAC

This form is your receipt when stamped by cashier.

THIS AFFIDAVIT WILL NOT BE ACCEPTED UNLESS ALL AREAS ON ALL PAGES ARE FULLY COMPLETED
 (See back of last page for instructions)

Check box if partial sale of property If multiple owners, list percentage of ownership next to name.

<p>1 Name <u>Anita Anderson</u></p> <p>Mailing Address <u>327 N. Stanley</u></p> <p>City/State/Zip <u>Medical Lake, WA 99022</u></p> <p>Phone No. (including area code) <u>(509) 552-3251</u></p>	<p>2 Name <u>Darin Anderson</u></p> <p>Mailing Address <u>1046 15th Street</u></p> <p>City/State/Zip <u>Clarkston, WA</u></p> <p>Phone No. (including area code) <u>(509) 758-2391</u></p>								
<p>3 Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee</p> <p>Name _____</p> <p>Mailing Address _____</p> <p>City/State/Zip _____</p> <p>Phone No. (including area code) _____</p>	<p>List all real and personal property tax parcel account numbers - check box if personal property</p> <table style="width: 100%;"> <tr> <td style="width: 80%;"><u>100434601007</u> <input type="checkbox"/></td> <td style="width: 20%;"></td> </tr> <tr> <td>_____ <input type="checkbox"/></td> <td></td> </tr> <tr> <td>_____ <input type="checkbox"/></td> <td></td> </tr> <tr> <td>_____ <input type="checkbox"/></td> <td></td> </tr> </table> <p>List assessed value(s) <u>86,700</u></p>	<u>100434601007</u> <input type="checkbox"/>		_____ <input type="checkbox"/>		_____ <input type="checkbox"/>		_____ <input type="checkbox"/>	
<u>100434601007</u> <input type="checkbox"/>									
_____ <input type="checkbox"/>									
_____ <input type="checkbox"/>									
_____ <input type="checkbox"/>									

4 Street address of property: _____

This property is located in Clarkston

Check box if any of the listed parcels are being segregated from another parcel, are part of a boundary line adjustment or parcels being merged.

Legal description of property (if more space is needed, you may attach a separate sheet to each page of the affidavit)

The South 90 Feet of the East 165 Feet of the North half of Lot 1 of Block "UU" of Vineland, according to the recorded plat thereof, in Asotin County, Washington.

5 Select Land Use Code(s):

11 - Household, single family units

enter any additional codes: _____

(See back of last page for instructions)

	YES	NO
Is this property exempt from property tax per chapter 84.36 RCW (nonprofit organization)?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6

	YES	NO
Is this property designated as forest land per chapter 84.33 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this property classified as current use (open space, farm and agricultural, or timber) land per chapter 84.34?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Is this property receiving special valuation as historical property per chapter 84.26 RCW?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If any answers are yes, complete as instructed below.

(1) NOTICE OF CONTINUANCE (FOREST LAND OR CURRENT USE)
 NEW OWNER(S): To continue the current designation as forest land or classification as current use (open space, farm and agriculture, or timber) land, you must sign on (3) below. The county assessor must then determine if the land transferred continues to qualify and will indicate by signing below. If the land no longer qualifies or you do not wish to continue the designation or classification, it will be removed and the compensating or additional taxes will be due and payable by the seller or transferor at the time of sale. (RCW 84.33.140 or RCW 84.34.108). Prior to signing (3) below, you may contact your local county assessor for more information.

This land does does not qualify for continuance.

DEPUTY ASSESSOR _____ DATE _____

(2) NOTICE OF COMPLIANCE (HISTORIC PROPERTY)
 NEW OWNER(S): To continue special valuation as historic property, sign (3) below. If the new owner(s) does not wish to continue, all additional tax calculated pursuant to chapter 84.26 RCW, shall be due and payable by the seller or transferor at the time of sale.

(3) OWNER(S) SIGNATURE

 PRINT NAME

7 List all personal property (tangible and intangible) included in selling price.

none

If claiming an exemption, list WAC number and reason for exemption:

WAC No. (Section/Subsection) 458-61A-203

Reason for exemption Case # 09-3-00117-0

Dissolution of Marriage

Type of Document Quit Claim Deed

Date of Document 8/7/09

Gross Selling Price \$	0.00
*Personal Property (deduct) \$	
Exemption Claimed (deduct) \$	
Taxable Selling Price \$	0.00
Excise Tax: State \$	0.00
<u>0.0025</u> Local \$	0.00
*Delinquent Interest: State \$	
Local \$	
*Delinquent Penalty \$	
Subtotal \$	0.00
*State Technology Fee \$	5.00
*Affidavit Processing Fee \$	
Total Due \$	10.00

A MINIMUM OF \$10.00 IS DUE IN FEE(S) AND/OR TAX
 *SEE INSTRUCTIONS

8 I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

Signature of Grantor or Grantor's Agent <u>Anita Anderson</u> Name (print) <u>Anita Jones-Anderson</u> Date & city of signing: _____	Signature of Grantee or Grantee's Agent <u>Darin Anderson</u> Name (print) <u>Darin Anderson</u> Date & city of signing: <u>PA</u>
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Perjury: Perjury is a class C felony which is punishable by imprisonment in the state correctional institution for a maximum term of not more than five years, or by a fine in an amount fixed by the court of not more than five thousand dollars (\$5,000.00), or by both imprisonment and fine (RCW 9A.20.020 (1C)).

Cash 10.00 PA

ASOTIN COUNTY
 TREASURER

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