

REAL ESTATE EXCISE TAX AFFIDAVIT

This form is your receipt when stamped by cashier.

PLEASE TYPE OR PRINT

CHAPTER 82.45 RCW - CHAPTER 458-61A WAC
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.

| | | | |
|---------------------------------------|---------------------------------------|---------------------------------------|---|
| SELLER GRANTOR | Name <u>Jason E. Schlee</u> | BUYER GRANTEE | Name <u>Shawn M. Wilks</u> |
| | <u>Jessica M. Schlee</u> | | <u>Lynell</u> <u>Lynsee A. Wilks</u> |
| | Mailing Address <u>PO Box 201</u> | | Mailing Address <u>PO Box 361</u> |
| | City/State/Zip <u>Asotin WA 99402</u> | | City/State/Zip <u>Asotin WA 99402</u> |
| Phone No. (including area code) _____ | | Phone No. (including area code) _____ | |

| | | |
|--|---|------------------------|
| Send all property tax correspondence to: <input checked="" type="checkbox"/> Same as Buyer/Grantee | List all real and personal property tax parcel account numbers - check box if personal property | List assessed value(s) |
| Name <u>Shawn M. Wilks</u> <u>Lynell</u> <u>Lynsee A. Wilks</u> | <u>11370000900000000</u> <input type="checkbox"/> | <u>103,800.00</u> |
| Mailing Address <u>PO Box 361</u> | _____ <input type="checkbox"/> | _____ |
| City/State/Zip <u>Asotin WA 99402</u> | _____ <input type="checkbox"/> | _____ |
| Phone No. (including area code) _____ | _____ <input type="checkbox"/> | _____ |

Street address of property: 419 Garfield Street, Asotin, WA

This property is located in unincorporated Asotin County OR within city of Asotin (city).

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.

Lot 9 of Church Addition, according to the official plat thereof, filed in Book D of Plats at Page(s) 24, Official Records of Asotin County, Washington.

Select Land Use Code(s):
11 Land with Mobile Home
enter any additional codes: _____
(See back of last page for instructions)

| | | |
|--|--------------------------|-------------------------------------|
| | YES | NO |
| Was the seller receiving a property tax exemption or deferral under chapters 84.36, 84.37, or 84.38 RCW (nonprofit organization, senior citizen, or disabled person, homeowner with limited income)? | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

| | | |
|---|--------------------------|-------------------------------------|
| | 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 RCW? | <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

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

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

WAC No. (Section/Subsection) _____

Reason for exemption _____

Type of Document Statutory Warranty Deed (SWD)

Date of Document 10/31/19

| | |
|--------------------------------|-------------------------|
| Gross Selling Price \$ | <u>120,000.00</u> |
| *Personal Property (deduct) \$ | <u>0.00</u> |
| Exemption Claimed (deduct) \$ | <u>0.00</u> |
| Taxable Selling Price \$ | <u>120,000.00</u> |
| Excise Tax : State \$ | <u>1,536.00</u> |
| Local \$ | <u>900.00</u> |
| *Delinquent Interest: State \$ | <u>0.00</u> |
| Local \$ | <u>0.00</u> |
| *Delinquent Penalty \$ | <u>0.00</u> |
| Subtotal \$ | <u>2,436.00</u> |
| *State Technology Fee \$ | <u>5.00</u> <u>5.00</u> |
| *Affidavit Processing Fee \$ | <u>0.00</u> |
| Total Due \$ | <u>2,441.00</u> |

0201

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

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

| | |
|--|---|
| Signature of Grantor or Grantor's Agent <u>Jason E. Schlee</u> | Signature of Grantee or Grantee's Agent <u>Shawn M. Wilks</u> |
| Name (print) <u>Jason E. Schlee</u> | Name (print) <u>Shawn M. Wilks</u> |
| Date & city of signing: <u>11.4.19, Clarkston, WA</u> | Date & city of signing: <u>11.6.19, Clarkston, WA</u> |

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)).

ATEC CL # 30315#

PAID

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ASOTIN COUNTY
TREASURER