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PAT Equity PLOWY

WHEN RECORDED MAIL TO:	,
Bank of America Consumer Collateral Tracking	
FLS-700 04-01	an or of
9000 Southside Blvd, Bldg 700	
Jacksonville, FL 32258	4 44. 63 634
Account Number: 35300007018195233	
Account Number: 35300007018195233 CAP Number: 031071416360	COOK AND DAY LINE
Data Printed: 07/16/03	FIRST AMERICAN TITLE
Reconveyance Fee: \$ 0.00	2 422992
necontefance tee. 3 0.00	
DEED OF TRUS	CT
DEED OF IROS	o
THIS DEED OF TRUST is granted this /7 day of	7/
BY RONALD D. HOLBROOK AND JULIA C. HOLBROOK HUSBAN	<u> </u>
HOLBROOK AND JENNIFER M. HOLBROOK, HUSBAND AND WIFE	C AND WIFE AND JOSHUA W.
THE THE PROPERTY AND WIFE	
("Grantor") to PRLAP, Inc. ("Trustee"), whose address is 1085	Moita Post Part Ct. 201 P.
office. "Grantor" herein shall mean each of them jointly and	Severally Creates AMAS BANKING CENTER
in joint) and	severally. Grantor agrees as follows:
CONVEYANCE. Grantor hereby bargains, sells and conversall of Grantor's right, title and interest in the following decrease.	evs to Trustee in trust with some of and
	led real property ("Property") whether
	real property (Property), whether how
312 WARD ROAD, WASHOUGAL, WA 98671	·
(MUMBER) (STREET) (CIT	(ZIP COOE)
	ten cose
in County County	Washington and legally described as:
LOT 6, WARD ACRES ANNEX, AS PER PLAT FILED IN B	OOK "A" OF PLATS PAGE
THE STATE OF STATE AND LIGHT WASHINGTON AS	BBRY LEGAL LOT 6 WARD
TOTAL OF M LO 137 Dated: 03/05/99 MMJ	
Information: DEED OF TRUST RECORDING NO. 187/475	76. 0

Property Tax ID # ___01059640070600

together with all equipment and fixtures, now or later attached to the Property; all easements, tenements, hereditaments and appurtenances, now or later in any way appertaining to the Property; all revalties, mineral, oil and gas rights and profits derived from or in any way connected with the Property; all water and ditch rights, however evidenced, used in or appurtenant to the Property; and all leasehold interests, rents, payments, issues and profits derived from or in any way connected with the Property.

2. ASSIGNMENT OF RENTS.

2.1 ASSIGNMENT. Grantor further assigns to Beneficiary all of Grantor's interest in all existing and future leases, licenses and other agreements for the use or occupancy of the Property ("Contracts"), including the immediate and continuing right to collect, in either Grantor's or Beneficiary's name, all rents, receipts, income and other payments due or to become due under the Contracts ("Payments"). As long as there is no default under this Deed of Trust, Grantor is granted a license to collect the Payments, but such proceeding.

2.2 DISCLAIMER. Nothing contained in this Deed of Trust shall be construed as obligating Beneficiary or any receiver to take any action to enforce any provision of the Contracts, expend any money, incur any expense or perform any obligation under the Contracts. Beneficiary's duties are expressly limited to giving of proper credit for all Payments received by it.

Reference No: 013002 - 031071416360 CLS3183-1 /0006/WA/ID 03-02 93-05-3183NSB

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4. AFFIRMATIVE COVENANTS, Grantor shall:

- 4.1 MAINTENANCE OF PROPERTY. Maintain and preserve the Property in good condition and repair, ordinary wear and tear excepted; complete any improvement which may be constructed on the Property; and restore any improvement which may be damaged or destroyed;
- 4.2 COMPLIANCE WITH LAWS. Comply with all laws, ordinances, regulations, covenants, conditions and restrictions affecting the Property;
- 4.3 REAL ESTATE INTERESTS. Perform all obligations to be performed by Grantor under the
- 4.4 PAYMENT OF CEBIS AND TAXES. Pay promptly all obligations secured by the Property; all taxes, assessments and governmental liens or charges levied against the Property; and all claims for labor, materials, supplies or otherwise which, if unpaid, might become a tien or charge upon the Property;
- 4.5 INSURANCE. Insure continuously, with financially sound and reputable insurers acceptable to Beneficiary, all improvements on the Property against all risks, casualties and losses through standard fire and extended coverage insurance or otherwise, including without limitation, insurance against fire, theft, casualty, vanidalism and any other risk Beneficiary may reasonably request. The insurance policies shall be in an aggregate amount of not less than the full replacement cost of all improvements on the Property, interest may appear. The amounts collected under the insurance policies may be applied to the Secured Obligations in any manner as Beneficiary determines, and such application shall not cause discontinuance of any proceeding to foreclose upon this Deed of Trust. In the event of foreclosure, all of Grantor's rights in the insurance policies shall pass to purchaser at the foreclosure safe;
- 4.6 HAZARDOUS WASTE. Notify Beneficiary within twenty-four (24) hours of any release of a reportable quantity of any hazardous or regulated substance, or of the receipt by Grantor of any notice, environmental pollution of any kind existing on the Property, or results from the use of the Property or any
- reasonable costs and expenses incurred in connection with foreclosing upon this Deed of Trust, defending any action or proceeding purporting to affect the rights or duties of Beneficiary or Trustee under this Deed of Trust, or managing the Property and collecting the Payments, including, without limitation, all attorneys' fees and value of the services of staff counsel, legal expenses, collection costs, costs of title search, and trustee's and receiver's fees to the maximum extent allowable by law.
 - 5. NEGATIVE COVENANTS. Grantor shall not without Beneficiary's prior written consent:
- 5.1 PAYMENTS. Accept or collect Payments more than one (1) month in advance of the due
 - 5.2 MODIFY CONTRACTS. Terminate, modify or amend any provision of the Contracts; or
- 5.3 RESTRICTIONS ON CONVEYANCES. Transfer or convey any interest in the Property, except by will or intestacy.
- EMINENT DOMAIN. In the event any portion of the Property is taken through eminent domain, the amount of the award to which Grantor is entitled shall be applied to the Secured Obligations.
- 7. RECONVEYANCE. Trustee shall reconvey such portion of the Property to the person entitled thereto upon written request of Beneficiary, or upon satisfaction of the Secured Obligations and written request for reconveyance made by Beneficiary or any person interested in the Property.
- 8. SUCCESSOR TRUSTEE. In the event of death, incapacity, disability or resignation of the Trustee, Beneficiary may appoint a successor trustee and, upon the recording of such appointment in the records of the county in which this Geed of Trust is recorded, the successor trustee shall be vested with all powers of the original Trustee.

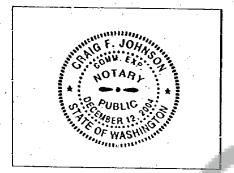
CLS3183-2

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ROOK 247 PAGE 75

ACKNOWLEDGEMENT BY INDIVIDUAL

FOR RECORDING PURPOSES, DO NOT WRITE, SIGN OR STAMP WITHIN THE ONE INCH TOP, BOTTOM AND SIDE MARGINS OR AFFIX ANY ATTACHMENTS.



THIS SPACE FOR NOTARY STAMP

STATE OF	WASHINGTON)		7 4
County of	CLARK	: \$5.)	- 7	. (
l certii M. HOLBR	fy that I know or have sat OOK and RONALD D. HOLB	isfactory evidence that <u>JOS</u> ROOK and JULIA C. HOLBROO	SHUA W. HOLBROOK and .	JENNIFER
				
		is/are/the individ	dual(s) who signed this	instrument in
mentioned 1	in the institutiont	be this/her/their free and n		
Dated:	/18/03	F	7	
CHUCATY PARE	F. Mires	My appointm	ent expires 12/12/04	4
To Trustee:				٦.
directed to Without war	cancel said note or notes tranty, all the estate now i	the note or notes secured by secured by this Deed of Trust and this Deed of Trust, which held by you under this Deed o	, have been paid in full. Y	ou are hereby
	reto.			
Dated:				Th
₩.	Ψ.,	Send Reconveyanc		7
	. (e 10:	
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ACKNOWLEDGMENT IN A REPRESENTATIVE	CAPACITY
FOR RECORDING PURPOSES, DO NOT WRITE, SIGN OR STAMP WITHIN THE ONE INCH TOP, BOTTOM AND SIDE MARGINS OR AFFIX ANY ATTACHMENTS.	
	1
	THIS SPACE FOR NOTARY STAMP
STATE OF WASHINGTON	4.7
County of : ss.	
•	
I certify that I know or have satisfactory evidence	that JOSHUA W. HOLBROOK and JENNIFER
M. HOLBROOK and RONALD O. HOLBROOK and JULIA	
is/are the individual(s) who signed this insthat (he/she/they) was/were authorized to execute	trument in my presence, on eath stated the instrument and acknowledged it as the
(TiTLE) of	(ENTITY)
to be the free and voluntary act of such party for the u	
y see at other party for the o	ses and purposes mentioned in the instrument
Dated:	
	ly appointment expires
ONOTARY PUBLIC FOR THE STATE OF	a sypomenent expires

CLS3183-5

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