

2021-001511

04/29/2021 05:08 PM

Return Address:

Nic Peterson
162 Passaic Way
Stevenson, WA 98648



Skamania County
Real Estate Excise Tax
35 244
APR 29 2021

PAID EXEMPT
Skamania County Treasurer
Shirley J. [Signature]

AFFIDAVIT (LACK OF PROBATE)

The undersigned affiant/grantee Nicholas Peterson, being first duly sworn
Name of Affiant
deposes and states as follows: That they are a rightful heir as listed on heirs at law, to the real
property described below, and is son
Relationship to decedent
of Daryl L. Peterson, who died on April 6, 2019
Decedent/Grantor Date
at Portland Multnomah Oregon
City County State

REAL PROPERTY SUBJECT TO THE AFFIDAVIT:

Abbreviated Legal Description:

Parcel 1: Lot 2, Blk 10 relocated plat of North
Bonnevile, Book "B" page "34-35" Skamania County
State of WA.

Parcel 2: Lot 3 Port of Skamania County s/p Blk T pg "93"
Skamania County, State of WA.

Assessor's Property Tax Parcel/Account Number: 02071900030700
(Attach full legal description of the property) 02072922020000

☒ Decedent left no Last Will and Testament.

☐ Decedent left a Last Will and Testament which HAS NOT been Probated or Revoked.

"Heirs at law" includes surviving spouse, children, adopted children, issue of
predeceased child or adopted child, parents, brothers and sisters of the decedent.
Affiant hereby identifies all heirs at law of the decedent: (use additional pages if
necessary)

Skamania County Assessor

Date 4/29/21 Parcel# 2-7-19-307
PD 2-7-29-22-200

(Page 1 of ____)

Nicholas Wyatt Peterson

Full name, age, relationship, address

Son 40 years old

162 passage way, Stevenson wa 98648

Full name, age, relationship, address

Stephen Peterson, 36

Son 1002 Chenoweth st No. Bonnaville wa 98639

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Full name, age, relationship, address

Dated : _____

Nicholas W Peterson
Affiant's full name

360 281 6075
Telephone number

162 Passag way
Stevenson WA 98648
City State Zip Code

Nu Pul 4/29/2021
Signature Date

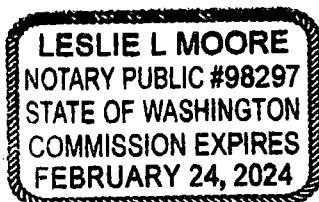
State of Washington County of Skamania

I know or have satisfactory evidence that Nicholas W Peterson
(name of person)

is the person who appeared before me, and said person acknowledged that (he/she) signed this affidavit and acknowledged it to be (his/her) free and voluntary act for the uses and purposes mentioned in this affidavit.

Dated: 4/29/21

(SEAL OR
STAMP)



Leslie L Moore
Signature of Notary Public

Residing at: Carson,

Notary Public in and for the State of WA

My appointment expires: 2/24/2024

STATE OF OREGON

CERTIFICATION OF VITAL RECORD

OREGON HEALTH AUTHORITY CENTER FOR HEALTH STATISTICS CERTIFICATE OF DEATH

810752
I.D. TAG NO.

STATE FILE NUMBER

1. Legal Name First: Daryl Middle: Lee Last: Peterson Suffix:		2. Death Date April 06, 2019	
3. Sex Male	4. Age 65 years	5. Social Security Number	
6. County of Death Multnomah		7. Decedent's Education Some college	
8. Birthdate July 11, 1953		9. Birthplace Vancouver, Washington	
10. Was Decedent of Hispanic Origin? No		11. Decedent's Race(s) White	
12. Was Decedent Ever in U.S. Armed Forces? No		13. Residence: Number and Street 1002 Chenoweth	
14. City/Town North Bonneville		15. Residence County Skamania	
16. State of Foreign Country Washington		17. Zip Code + 4 98639	
18. Inside City Limits? Yes		19. Marital Status at Time of Death Divorced	
20. Spouse's Name Prior to First Marriage		21. Usual Occupation Entrepreneur	
22. Kind of Business/Industry Small Business Owner		23. Father's Name Kenneth Peterson	
24. Mother's Name Prior to First Marriage Elsie Janson		25. Informant's Name Nicholas Peterson	
26. Telephone Number Not Available		27. Relationship to Decedent Son	
28. Mailing Address 162 Passage Way, Stevenson, WA 98648		29. Place of Death Hospital: Inpatient	
30. Facility Name Providence Portland Medical Center		31. Location of Death 4805 NE Glisan Street	
32. City/Town or Location of Death Portland		33. State Oregon	
34. Zip Code + 4 97213		35. Method of Disposition Removal From State	
36. Place of Disposition Columbia River Crematory		37. Location White Salmon, Washington	
38. Name and Complete Address of Funeral Facility Gardner Funeral Home 1270 N. Main, White Salmon, Washington 98672		39. Date of Disposition TBD	
40. Funeral Director's Signature Victoria R. Lara		41. OR License Number CO-3930	
42. Registrar's Signature Jennifer A. Woodward		43. Date Received MAY 01 2019	
44. Local File Number 002182		45. Amendment	

TO BE COMPLETED BY FUNERAL FACILITY
7140891

I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL CERTIFICATE ON FILE OR THE VITAL RECORDS FACTS ON FILE IN THE OREGON CENTER FOR HEALTH STATISTICS.

DATE ISSUED:

MAY 01 2019

THIS COPY IS NOT VALID WITHOUT INTAGLIO STATE SEAL AND BORDER.

JENNIFER A. WOODWARD, Ph.D.
STATE REGISTRAR

ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Unofficial
Copy



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