## ALTA COMMITMENT FOR TITLE INSURANCE EXHIBIT "A" LEGAL DESCRIPTION

ISSUED BY Stevens County Title & Escrow

File No.: 24-36230-SCT

Parcel 5829900:

That part of the North 400 feet of the NE1/4 of the NW1/4 of Section 7, Township 29 North, Range 42 East, W.M., in Stevens County, Washington, lying North and West of Whittier Road No. 1066 and Scriven Road No. 2362.

Abbreviated Legal: P/O NE1/4 NW1/4, 07-29-42

Tax Parcel No.: 5829900

Property Address: 4623 Oregon Way, Clayton, WA 99110

Seller: Buyer:

Seller: Ochenh & Utaltons A Buyer:

The address shown above is provided for information only, as a convenience for the customer and is not included in the legal description to be insured. The Address was determined by public records and the Company assumes no liability for any inaccuracy of the address.

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## IDENTIFICATION OF UTILITIES ADDENDUM TO PURCHASE AND SALE AGREEMENT

The following is part of the Purchas	se and Sale Agreeme	ent dated			1
between				("Buyer")	2
Buyer and Stephen L Watkins Seller		Buyer  Deborah E Watkins  Seller			3
concerning 4623 Oregon Way		Clayton		(the "Property").	4
Pursuant to RCW 60.80, Buyer an necessary to satisfy unpaid utility providing service to the Property a	charges, if any, affe nd having lien rights	ecting the Propert			5 6 7
WATER DISTRICT:	Well Name		e-	mail or website (optional)	8
SEWER DISTRICT:	Address			?	9
	City, State, Zip Septic		-	Fax. No. (optional)	10 11
	Name		e-	mail or website (optional)	12
	Address				13
IRRIGATION DISTRICT:	City, State, Zip None			Fax. No. (optional)	14
	Name		e-	mail or website (optional)	15
	Address				16
GARBAGE:	City, State, Zip Sunshine Dispo	osal		Fax. No. (optional)	17
	Name		e-	mail or website (optional)	18
	Address				19
ELECTRICITY:	City, State, Zip Inland Power			Fax. No. (optional)	20
	Name		e-	mail or website (optional)	21
	Address				22
GAS:	City, State, Zip N/A			Fax. No. (optional)	23
	Name		e-	mail or website (optional)	24
	Address				25
SPECIAL DISTRICT(S): (local improvement districts or utility local improvement districts)	City, State, Zip			Fax. No. (optional)	26
	Name		e-	mail or website (optional)	27
	Address			Cay Ma (antiqual)	28
If the above information has no within days (5 if not Broker or Buyer Broker with the nand (2) Buyer and Seller authoriand addresses of the utility providers in	filled in) of mutual a ames and addresses ze Listing Broker or	acceptance of this of all utility provi	s Agreement, Seller sh iders having lien rights	all provide the Listing affecting the Property	29 30 37 33
Nothing in this Addendum shall I (including unbilled charges). Buye to insure payment of, Seller's utility	r understands that th				3:3:3:
		SIL	9/24/24	EW 9/2.	4/
Buyer's Initials Date Bu	yer's Initials Dat	seller's initia	als Date Sell	er's Initials Date	ă.

Buyer

## **FIRPTA CERTIFICATION**

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1 2

Date

The Foreign Investment in Real Property Tax Act ("FIRPTA"), 26 U.S.C. 1445, provides that a buyer of a U.S. real property interest must withhold tax if Seller is a foreign person, unless one of the exceptions in the Act applies. The following will inform Buyer and Closing Agent whether tax withholding is required.

Note: The above law applies to foreign corporations, partnerships, trusts, estates and other foreign entities, as well as to foreign individuals. If Seller is a corporation, partnership, trust, estate or other entity, the terms "I" and "my" as used below means the corporation or other entity. A "real property interest" includes full or part ownership of land and/or improvements thereon; leaseholds; options to acquire any of the foregoing; and an interest in foreign corporations, partnerships, trusts or other entities holding U.S. real estate.

SELLER CERTIFICATION. Seller hereby certifies the	e following:		
PROPERTY. I am the Seller of real property ☑ at:			
4623 Oregon Way	Clayton	WA S	99110
Address	City	State	Zip
or (if no street address) legally described on the att	lacried.		
CITIZENSHIP STATUS. I ☐ AM ☑ AM NOT a non-foreign trust, foreign estate or other foreign business			
TAXPAYER I.D. NUMBER.  My U.S. taxpayer identification number (e.g. social se	ecurity number) is	to be provided b	y Seller at Closing)
ADDRESS.	(12.112.112.112.112.112.112.112.112.112.		,,
My home address is 4623 Oregon Way	Clayton	WA	99110
Address	City	State	Zip
it is true, correct and complete. I understand that this C ("IRS") and that any false statement I have made here constant. Seller Seller Date	could be punished by fine, impris		
BUYER CERTIFICATION (Only applicable if Seller is	a non-resident alien).		
If Seller <u>is</u> a non-resident alien, and has not obtained 15% of the amount realized from the sale and pastatement below is correct:			
□ Amount Realized (\$300,000 or less) and Family am to pay for the property, including liabilities exceed \$300,000; and (b) I certify that I or a m property for at least 50% of the time that the property month periods following the date of this sa	assumed and all other consinember of my family* have de- roperty is used by any person	ideration to sefinite plans to during each	Seller, does not o reside on the of the first two
□ Amount Realized (more than \$300,000, but not (a) I certify that the total price that I am to pay consideration to Seller, exceeds \$300,000, but member of my family* have definite plans to re property is used by any person during each of the sale. If Buyer certifies these statements, then Clather sale and pay it to the IRS.	for the property, including liab does not exceed \$1,000,000; side on the property for at lea the first two twelve month period	vilities assume and (b) I ce ast 50% of the ods following	ed and all other ertify that I or a ne time that the the date of this
* (Defined in 11 U.S.C. 267(c)(4). It includes broth	hers, sisters, spouse, ancestor	s and lineal d	escendants).
Under penalties of perjury, I declare that I have example belief both statements are true, correct and complete IRS and that any false statement I have made here or	. I understand that this Certific	ation may be	disclosed to the

Date

Buyer