

**Return Address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Document 1 Title:** \_\_\_\_\_

Reference #'s: \_\_\_\_\_

Additional reference #'s on page \_\_\_\_\_

Grantors:

Grantees:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Additional grantors on page \_\_\_\_\_

Additional grantees on page \_\_\_\_\_

**Document 2 Title:** \_\_\_\_\_

Reference #'s: \_\_\_\_\_

Additional reference #'s on page \_\_\_\_\_

Grantors:

Grantees:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Additional grantors on page \_\_\_\_\_

Additional grantees on page \_\_\_\_\_

**Legal Description** (abbreviated form: i.e. lot, block, plat or S,T,R quarter/quarter):

\_\_\_\_\_  
Additional legal is on page \_\_\_\_\_

**Assessor's Property Tax Parcel/Account Number:**

\_\_\_\_\_

Emergency nonstandard document recording: I am requesting an emergency nonstandard recording for an additional fee as provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some part of the text of the original document.

Signature: \_\_\_\_\_

The Auditor/Recorder will rely on the information provided on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.