

CERTIFICATION OF TRUST



(RCW 11.98.075)

The Trustee(s) hereby certify, represent, warrant and declare as follows:

Trust Information

1. Trust name (as stated in the Trust document): _____
2. Names of all grantors, settlors, trustors, or other creator(s) of Trust: _____

3. Date Trust document was executed (if testamentary trust, provide date of the Will): _____
4. Any amendments(s) to the Trust document? No Yes - Provide Date of Amendment _____
If testamentary trust, provide date of any codicil(s). _____
5. **Select and complete one of the two options:**
 - a. **Option One:** The Trust uses a Personal Tax Identification Number (TIN).
(Provide the 9-digit number) ____ - ____ - _____ belonging to:
(Provide individual's name) _____
 - b. **Option Two:** The Trust uses an Employer Identification Number (EIN).
(Provide the 9-digit number): ____ - _____
6. **Type of Trust:**
 - Revocable, with person(s) having power to revoke, amend or modify as follows:
 - o Grantors, settlors, trustors or other creators of Trust
 - o Other person(s) having power to revoke, amend or modify:
 - Irrevocable
7. **The Trust is located in:**
 - Washington State
 - Not in Washington State

Trustee Information

8. Name of initial Trustee(s): _____
9. Name and address of each *currently acting* Trustee(s):
 - (1) Name: _____
Address: _____

 - (2) Name: _____
Address: _____

Please note: If there are additional currently acting Trustee(s), provide their information and attestations on attached sheet(s).
10. Names and addresses of each successor Trustee, in order of appointment:
 - (1) Name: _____
Address: _____

 - (2) Name: _____
Address: _____

Please note: If there are additional Successor Trustees, please provide their information on attached sheet(s).

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11. Select one of the following three options:

- a. **Option One:** The Trustee(s) are authorized to borrow money without limitations:
- b. **Option Two:** The Trustee(s) are authorized to borrow money with the following limitations:
(List any limitations) _____
- c. **Option Three:** The Trustee(s) are not authorized to borrow money

12. Select one of the following three options:

- a. **Option One:** The Trustee(s) are authorized to sell, convey, pledge, mortgage, lease, encumber, or transfer title to any Trust assets without limitations.
- b. **Option Two:** The Trustee(s) are authorized to sell, convey, pledge, mortgage, lease, encumber, or transfer title to any Trust assets with the following limitations:
(List any limitations) _____
- c. **Option Three:** The Trustee(s) are not authorized to sell, convey, pledge, mortgage, lease, encumber, or transfer title to any Trust assets.

13. Select one of the following two options:

- a. **Option One:** The Trustee(s) have no restrictions in dealing the assets of the Trust
- b. **Option Two:** The Trustee(s) are subject to the following restrictions in dealing the assets of the Trust:
(List any restrictions) _____

Miscellaneous Information

14. The currently acting Trustee(s) named above is/are the only currently acting Trustee(s) and are duly qualified under applicable law to act as Trustee(s).

Under the terms of the Trust document each Trustee is authorized to act independently on behalf of the Trust and without the consent of any other Trustee or person.

To the best of Trustee's/Trustees' knowledge, there is no claim, litigation, cause of action alleged, or challenge of any kind, which contests or questions the validity of the Trust or a Trustee's authority to act on behalf of the Trust.

15. The Trust is in full force and effect and has not been terminated, revoked, amended or modified in any way that causes the representation in the Certification of Trust to be inaccurate or incorrect. The undersigned will promptly notify BECU in writing of any change in the currently acting Trustee(s) or of any revocation, amendment or modification to the Trust that would cause the representations made in the Certification of Trust to become inaccurate or incorrect.

By signing below each Trustee declares under penalty of perjury under the laws of the State of Washington that the statements made in this Certification of Trust are true and correct, and it is executed at the place and on the date indicated below.

(1) Name of Trustee: _____
Signature of Trustee: _____
Date: _____
City and State: _____

(2) Name of Trustee: _____
Signature of Trustee: _____
Date: _____
City and State: _____