199912210042
Kathy Hill, Skagit County Auditor
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Return Address:

Don Hanson Construction
12843 Pulver Rd
Burlington WA 98233

CLAIM OF LIEN

Indexing information required by the Washington State Auditor's/Recorder's Office, (RCW 36.18 and RCW 65.04) 1/97: (please print last name first)

Reference # (If applicable): _____

Grantor(s) (Owner): (1) Eco Enterprises (2) _____ Add'l. on pg___

Grantee(s) (Claimants): (1) Don Hanson Construction (2) _____ Add'l. on pg___

Legal Description (abbreviated): Park Ridge Div II, Lot 22 Add'l. legal is on page___

Assessor's Property Tax Parcel /Account # P105904 4634-000-022-0001

Don Hanson Construction
Claimant
vs.
Eco Enterprises
Name of person indebted to Claimant

Notice is hereby given that the person named below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

1. NAME OF LIEN CLAIMANT: Don Hanson Construction
TELEPHONE NUMBER: 360 757-4231 ADDRESS: 12843 Pulver Rd.
Burlington WA 98233

2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: August 31 1999

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Eco Enterprises

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 3817 Carpenter St
Mount Vernon WA 98273

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Randy Eco
TELEPHONE NUMBER: 360-424-5747 ADDRESS: 900 Crestview Lane
Mount Vernon WA 98273

6. THE LAST DATE ON WHICH LABOR WAS PERFORMED PROFESSIONAL SERVICES WERE FURNISHED; CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE; OR MATERIAL, OR EQUIPMENT WAS FURNISHED: October 5 1999

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: $ 2,575.73

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE : _____

Donn S. Hanson
Claimant

DONN S. HANSON
Print or Type Name

12843 PULVER RD.
Address

BURLINGTON, WASH 98233

360-757-4231
Telephone Number

STATE OF WASHINGTON }
} ss.
County of Skagit }

DONN S. HANSON, being sworn, says: I am the claimant (or attorney of the claimant, or administrator, representative, or agent of the trustees of an employee benefit plan) above named; I have read or heard the foregoing claim, read and know the contents thereof, and believe the same to be true and correct and that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

Donn S. Hanson

Date this 21ST day of December.

Michael James Brannan

Print Name Michael James Brannan

Notary Public in and for the State of Wash.

My appointment expires: 11/10/2000

MICHAEL JAMES BRANNAN NOTARY PUBLIC STATE OF WASHINGTON COMMISSION EXPIRES

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVIDED BY LAW.

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