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Kathy Hill, Skagit County Auditor

1/28/2000 Page 1 of 2 10:49:04AM

**CLAIM OF LIEN**

Indexing information required by the Washington State Auditor's/Recorder's Office, (RCW 36.18 and RCW 65.04) 1/97:  
 Reference # (If applicable): \_\_\_\_\_  
 Grantor(s) (Owner) : (1) Shelter Cove Const. (2) \_\_\_\_\_ Add'l on pg \_\_\_\_\_  
 Grantee(s) (Claimants): (1) Van Beek Drywall, Inc. (2) \_\_\_\_\_ Add'l on pg \_\_\_\_\_  
 Legal Description (abbreviated): 20399 Shamrock Pl (Lot 3) Burlington Add'l legal is on page \_\_\_\_\_  
 Assessor's Property Tax Parcel/Account # 4714-000-003-0000 / P 12947

Van Beek Drywall, Inc. Claimant, vs. Shelter Cove Const. (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: Van Beek Drywall, Inc. (Doug Van Beek)  
 Telephone number: 360-647-8070 Address: 2121 King St. Bellingham, WA 98225
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: 11/3/99
3. Name of person indebted to the claimant: Shelter Cove Const.
4. Description of the property against which a lien is claimed (street address, legal description or other information that will reasonably describe the property): 20399 Shamrock Pl, Burlington  
Lot 3
5. Name of the owner or reputed owner (If not known state "unknown"): Shelter Cove Const.  
 Telephone number: 425-210-3055 Address: 14007 NE 181 St., Condo  
A-204, Woodinville, WA 98072
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: 12/16/99
7. Principal amount for which the lien is claimed is: \$10,893.19
8. If the claimant is the assignee of this claim so state here: yes

Doug Van Beek  
Claimant

Doug Van Beek  
Print or Type Name

2121 King St  
Address

Bellingham, WA 98225

(360) 647-8070  
Telephone Number

STATE OF WASHINGTON )  
COUNTY OF Whatcom ) ss:

Doug Van Beek, 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.

Sign Name \_\_\_\_\_

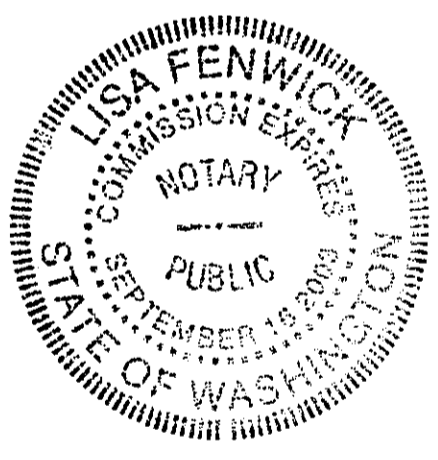
Signed and sworn to before me on this 27<sup>th</sup> day of January, 2000.

Sign Name Lisa R. Fenwick

Print Name Lisa R. Fenwick

Notary Public in and for the State of Washington

My appointment expires: 9-16-03



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