



200404140041
Skagit County Auditor

4/14/2004 Page 1 of 2 9:37AM

Return Address:

Dahlman Pump & Well Drilling, Inc.
P. O. Box 422
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) <u>Garrett Kuipers</u>	(2) _____	Add'l. on pg. _____
Grantee(s) (Claimants): (1) <u>Dahlman Pump & Well Drilling, Inc.</u>		Add'l. on pg. _____
Legal Description (abbreviated): <u>NW¹/₄ NW¹/₄ S10 T 33 R3E</u>		Add'l. legal is on page _____
Assessor's Property Tax Parcel /Account # <u>P 15626</u>		

Dahlman Pump & Well Drilling, Inc.

Claimant

vs.

Garrett Kuipers

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:

- NAME OF LIEN CLAIMANT: Dahlman Pump & Well Drilling, Inc.
TELEPHONE NUMBER: 360 757-6666 ADDRESS: P. O. Box 422
Burlington, WA 98233
- 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: February 12, 2004
- NAME OF PERSON INDEBTED TO THE CLAIMANT: Garrett Kuipers
- DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property):
NW¹/₄ NW¹/₄ S10 T33 R3E
P 15626
- NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Garrett Kuipers
TELEPHONE NUMBER: 360 424-4328 ADDRESS: 19020 Beaver Marsh Road
Mount Vernon, WA 98273
- 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: February 12, 2004



Skagit County Auditor

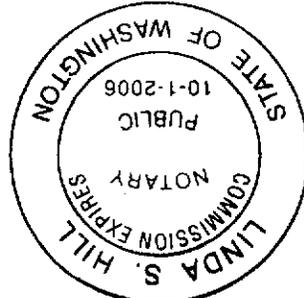
200404140041



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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



Print Name: Linda S. Hill
Notary Public in and for the State of Washington
My appointment expires: 10-1-06

Signed and sworn to before me on this 15th day of April 2004

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.

Scott Fowler
County of Skagit
SS. }

STATE OF WASHINGTON

Claimant: Scott Fowler
Beckman Pump & Well Drilling, Inc.
P. O. Box 422
Address: Burlington, WA 98233
Telephone Number: 360 757-6666

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$10,916.56
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE:

CLAIM OF LIEN