UNOFFICIAL DOCUMENT

200507280195
Skagit County Auditor
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Return Address:
Glenn Nickel
P.O. Box 775
Concrete, WA. 98237

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) Richard Wagonee JR. (2) _____ Add'l. on pg___

Grantee(s) (Claimants): (1) Nickel Const. (2) _____ Add'l. on pg___

Legal Description (abbreviated): Sheas to Hamilton Lots 4,5,6 BLK 2 Add'l. legal is on page___

Assessor's Property Tax Parcel /Account # 4121-002-006-0014 P73917

Nickel Construction
Claimant

vs.

Richard Wagner JR. Trust
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: Nickel Construction
TELEPHONE NUMBER: 360-826-1153 ADDRESS: P.O. Box 775
Concrete, WA. 98237

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: 7-14-05

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Richard Wagner SR. Trust

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED (street address, legal description or other information that will reasonably describe the property): 970 B Pettit St.
Hamilton, WA. 98255

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state "unknown"): Richard Wagner SR.
TELEPHONE NUMBER: _____ ADDRESS: P.O. Box 54, Hamilton WA. 98255

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: 7-15-05

Claim of Lien
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MATERIAL MAY NOT BE REPRODUCED IN WHOLE OR IN PART IN ANY FORM WHATSOEVER.

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: $ 3,237 00/100

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

Claimant

Glenn Nickel
Print or Type Name

P.O. Box 775, Concrete, WA. 98237
Address

360-826-1153
Telephone Number

STATE OF WASHINGTON }
} SS.
County of Skagit }

Glenn Nickel, 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.

Date this 28 day of July 2005.

Cheryl D Lanier

Print Name Cheryl D Lanier

Notary Public in and for the State of Washington

My appointment expires: 11-15-08

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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