

Glenn Nickel  
P.O. Box 775  
Concrete, WA  
98237



200606210066

Skagit County Auditor

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## Waiver of Lien

Satisfy

Date of this Document: 6-20-06

Reference Number of Any Related Documents: 200507280195

Lienholder:

Name Nickel Construction

Street Address P.O. Box 775

City/State/Zip Concrete, WA. 98237

Property Owner:

Name Richard Wagner JR. Trust

Street Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Abbreviated Legal Description (i.e., lot, block, plat, or section, township, range, quarter/quarter or unit, building and condo name): Shes's to Hamilton Lots 4,5,6 DK2

Assessor's Property Tax Parcel/Account Number(s): 4121-002-006-0014 P-73917

KNOW ALL MEN BY THESE PRESENTS: That I, Glenn K. Nickel  
the undersigned, for and in consideration of three thousand Two hundred Thirty Seven Dollars  
(\$ 3,237.00) and other good and valuable consideration, to me paid, the receipt whereof is  
hereby acknowledged, do hereby waive, release, remise and relinquish any and all right to claim any lien or liens for  
work done or material furnished, or any kind or class of lien whatsoever on the following described property:

970 B Pettit St. Hamilton, WA. 98255

P-73917

4121-002-006-0014

Title Owner of Said Property: Richard Wagner JR.

Signed, sealed and dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_.

Signed in the presence of:

\_\_\_\_\_  
Witness' Signature

By

[Signature]  
Lienholder's Signature

\_\_\_\_\_  
Witness' Signature

State of WA  
County of Skagit

On 6-21-06, before me, Glenn Nickel, appeared \_\_\_\_\_, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.


WITNESS my hand and official seal.

[Signature]  
Signature

Residing in Skagit My commission expires 10-1-09

Affiant \_\_\_\_\_ Known \_\_\_\_\_ Produced ID \_\_\_\_\_

Type of ID \_\_\_\_\_  
(Seal)

  
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