



200802190145

Skagit County Auditor

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211:25AM

AFTER RECORDING RETURN TO:

LIEN RESEARCH CORP.
P. O. BOX 148
MARYSVILLE, WA 98270

CLAIM OF LIEN

ROCKY'S CUSTOM PLUMBING, INC
Claimant.
VS
MIKE TVETER
(Name of person indebted to claimant)

NOTICE IS HEREBY GIVEN that the person below claims a lien pursuant to chapter 60.04 RCW. In support of this lien the following information is submitted:

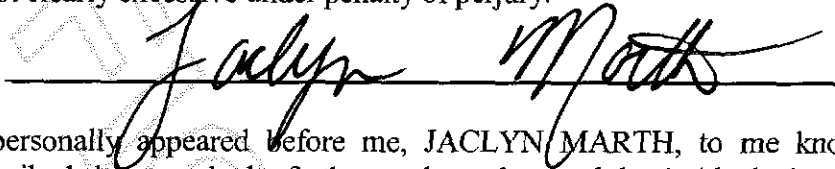
1. NAME OF LIEN CLAIMANT: ROCKY'S CUSTOM PLUMBING, INC
TELEPHONE NUMBER: (360) 659-9561
ADDRESS: 9510 132ND ST NE, ARLINGTON, WA. 98223
2. DATE ON WHICH THE CLAIMANT BEGAN TO PERFORM LABOR, PROVIDE PROFESSIONAL SERVICES, SUPPLY MATERIAL OR EQUIPMENT OR THE DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS BECAME DUE: JUNE 21, 2007
3. NAME OF PERSON INDEBTED TO THE CLAIMANT: MIKE TVETER, 1917 ORCHARD PL, ANACORTES, WA. 98221
4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED:
ADDRESS: 1917 ORCHARD PL, ANACORTES, WA.
LEGAL DESCRIPTION: LOT 16, ORCHARDS PLAN UNIT DEVELOPMENT, AS RECORDED UNDER AUDITOR'S FILE NO. 200601190126, RECORDS OF SKAGIT COUNTY, WASHINGTON, BEING A PORTION OF THE SOUTHEAST QUARTER OF THE SOUTHWEST QUARTER OF SECTION 25, TOWNSHIP 35 NORTH, RANGE 1 EAST, W.M.
SKAGIT COUNTY ASSESSOR'S TAX PARCEL NO. P123999
5. NAME OF OWNER OR REPUTED OWNER (if not known state "unknown"):
MICHAEL A. & KIMBERLY J. TVETER, 2607 SHANNON POINT, ANACORTES, WA. 98221 / & 1917 ORCHARD PL ANACORTES WA 98221
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: DECEMBER 18, 2007
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED: \$9,958.00 PLUS APPLICABLE LIEN FEES &/OR ATTORNEY'S FEES, &/OR INTEREST.
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE:
N/A.



For, ROCKY'S CUSTOM PLUMBING, INC, Claimant
9510 132ND ST NE
ARLINGTON, WA. 98223
(360) 659-9561
(Phone Number, Address, City/State of Claimant)


STATE OF WASHINGTON)
) ss
COUNTY OF SNOHOMISH)

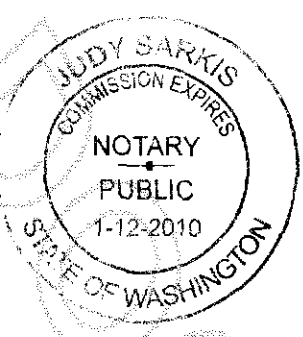
JACLYN MARTH, being sworn, says: I am the agent of the claimant (or attorney of the claimant, or administrator, representative, or agent for the trustee of an employee benefit plan) above named. I have read the foregoing claim, know the contents thereof, and believe the same to be true and correct and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



On this day personally appeared before me, JACLYN MARTH, to me known to be the individual, described above, and who further, under oath, stated that he/she had read the claim set forth above, and based upon information provided knew the contents thereof, and believed the same to be true and correct, and that the claim was made with reasonable cause and was not frivolous, and further acknowledged to me that he/she signed the same as his/her free and voluntary act and deed for the uses and purposes therein mentioned.

Subscribed and sworn to before me this 13 day of February, 2008


PRINTED NAME: JUDY SARKIS
NOTARY PUBLIC
in and for the State of Washington.
Residing in: STANWOOD
My commission expires: 1/12/2010



Order #08-020699, dated: 2/8/2008

