

Return Address:

Benjamin J. Lantz
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200902230135
Skagit County Auditor

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WASHINGTON STATE RECORDER'S Cover Sheet (RCW 65.04)

Document Title(s) (or transactions contained therein): (all areas applicable to your document must be filled in) Claim of Lien	
Reference Number(s) of Documents assigned or released: Additional reference #s on page ____ of document.	
Grantor(s) (Last name, first name, initials) Salem Village Additional names on page ____ of document.	
Grantee(s) (Last name, first name, initials) Bob's Heating & Air Conditioning Inc. f/k/a Bob's New Construction, Inc. Additional names on page ____ of document.	
Legal Description (abbreviated: i.e. lot, block, plat or section, township, range) UNIT 22 OF HIGHLAND GREENS TOWNHOMES DIV IV PUD, RECORDED UNDER AF#200810080003, BEING A PORTION OF THE NORTHWEST QUARTER OF THE SOUTHEAST QUARTER OF SECTION 9, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M. Additional legal is on page ____ of document.	
Assessor's Property Tax Parcel/Account Number P127995	<input type="checkbox"/> Assessor Tax # not yet assigned
The Auditor/Recorder will rely on the information provided on the form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.	

I am requesting an emergency nonstandard recording for an additional fee as provided in RCW 36.18.010. I understand that the recording processing requirements may cover up or otherwise obscure some part of the text of the original document.

Signature of Requesting Party

CLAIM OF LIEN

Bob's Heating & Air Conditioning Inc. f/k/a Bob's New Construction, Inc., claimant v.
Hansell/Mitzel, LLC d/b/a Hansell/Mitzel Homes

Notice is hereby given that the person names below claims a lien pursuant to
RCW 60.04. In support of this line the following information is submitted:

1. NAME OF CLAIMANT: Bob's Heating & Air Conditioning Inc.
TELEPHONE NUMBER: (425) 889-9345
ADDRESS: 13633 NE 126th Place, Suite 350
Kirkland, WA 98034

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:

3. NAME OF PERSON INDEBTED TO THE CLAIMANT:

Hansell/Mitzel, LLC d/b/a Hansell/Mitzel Homes

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS
CLAIMED (Street address, legal description or other information that will
reasonably describe the property):

3268 Village Court
Unit 22/Unit C
Mount Vernon, WA 98273

Abbreviated legal:
UNIT 22 OF HIGHLAND GREENS TOWNHOMES DIV IV PUD,
RECORDED UNDER AF#200810080003, BEING A PORTION OF THE
NORTHWEST QUARTER OF THE SOUTHEAST QUARTER OF
SECTION 9, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M.

5. NAME OF THE OWNER OR REPUTED OWNER (If not known state
"unknown"):

Salem Village

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:



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November 26, 2008

7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS:
\$3,861.00

8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE
HERE: NO

STATE OF WASHINGTON)

) ss.

COUNTY OF KING)

Doug Quinn, 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 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.

BOB'S HEATING & AIR CONDITIONING INC.
f/k/a BOB'S NEW CONSTRUCTION, INC.

By: Doug Quinn
Its: President

SUBSCRIBED AND SWORN TO before me this 14 day of February, 2009.

Elizabeth Guist
Print Name
NOTARY PUBLIC in and for the State of
Washington, residing in Auburn
My commission expires: 2-28-10



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