

CHAD & KIM SAVAGE
22164 HWY 9
MOUNT VERNON, WA 98274



200908040075
Skagit County Auditor

8/4/2009 Page 1 of 2 3:00PM

Document Title: RELEASE OF LIEN

Reference Number: 200812090031

GUARDIAN NORTHWEST TITLE CO.
ACCOMMODATION RECORDING ONLY

Grantor(s):

☐ additional grantor names on page ____ WILD

1. PROMARK CONCEPTS LLC
- 2.

Grantee(s):

☐ additional grantee names on page ____

1. PACIFIC COAST ASSOCIATES, INC
- 2.

Abbreviated legal description:

☐ full legal on page(s) ____

PTN LOT 4 SP 38-87 AF# 8808180023
NE-NE 25-33-4

Assessor Parcel / Tax ID Number:

☐ additional tax parcel number(s) on page ____

P121695

I, MARLA HICKOK, am hereby requesting an emergency non-standard recording for an additional fee 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. Recording fee is \$42.00 for the first page, \$1.00 per page thereafter per document. In addition to the standard fee, an emergency recording fee of \$50.00 is assessed. This statement is to become part of the recorded document.

Signed

Marla Hickok

Dated

8-4-09

CONDITIONAL WAIVER & RELEASE UPON PROGRESS PAYMENT

Upon receipt by the undersigned of a check from

Pacific Coast Assoc, Inc.
(Maker of Check)

in the sum of \$ 9,500.00 payable to
(Amount of Check)

Pro Mark Concepts LLC.
(Payee or Payees of Check)

and when the check has been properly endorsed and has been paid by the bank upon which it is drawn, this document shall become effective to release pro tanto any mechanic's lien, stop

notices or bond right the undersigned has on the job of

Chad's Kim Savage

located at 22164 Hwy. 9 Mt. Vernon 98271 to the following extent.
(Address or Legal Description)

This release covers a progress payment for labor, services, equipment, or materials

furnished to

Savage's
(Your Customer)

through to

10/22/08
(Date)

only and does not cover any retention or items after said date.

Before any recipient of this document relies on it, said party should verify evidence of payment to the undersigned.

DATED

10/22/08

Pro Mark Concepts LLC.
(Company Name)

By

[Signature]

Federal Taxpayer ID # 16-1750887

Address: P.O. Box 2309

City, State: Snodhoush, WA 98291

Telephone Number 206-910-4499

Contractor's License # PROMAC194C7



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