



201801260081

Skagit County Auditor

\$75.00

1/26/2018 Page

1 of

2 1:39PM

Return Address:

Document Title(s):

Waiver of Lien

Reference Number (if applicable):

Grantor(s):

☐ additional grantor names on page ____

1. Mark Root

2. _____

Grantee(s):

☐ additional grantee names on page ____

1. Right way Plumbing

2. _____

Abbreviated legal description:

☐ full legal on page(s) ____

Lot 22 Marine Heights

Assessor Parcel / Tax ID Number:

☐ additional parcel number(s) on page ____

P 111760

WAIVER OF LIEN BY CONTRACTOR, SUBCONTRACTOR(S) AND SUPPLIER

We, the undersigned, acknowledge receipt of the amounts stated below as full payment for all labor, professional services, materials, or equipment furnished for use on or about the property of Mark Root (owner) in Skagit

County, Washington, through the 23rd day of January (month), 2018 (year).

The property is described as follows (give legal description):

Parcel # R111760 Lot 22 Marine Heights

4214 Marine Heights Way, Anacortes WA 98221

Each person or entity signing this release form releases and waives any interest in the property described above and releases and waives any right to claim a lien on that property for any labor, professional services, materials, or equipment provided through the date listed above. Each person or entity signing this release form reserves the right to claim a lien for any labor, professional services, materials, or equipment provided after that date, to the extent allowed by law.

The consideration received by each person or entity for this release is as follows:

Right Way Plumbing, Heating,

COMPANY NAME

[Signature]
AUTHORIZED SIGNATURE

\$ 32,792.84

AMOUNT RECEIVED

Edward A. Clark

PRINTED NAME OF PERSON
SIGNING THIS RELEASE

President

TITLE

1-23-2018
DATE

☐ CONTRACTOR
☒ SUBCONTRACTOR
☐ SUPPLIER

COMPANY NAME

AUTHORIZED SIGNATURE

\$

AMOUNT RECEIVED

PRINTED NAME OF PERSON
SIGNING THIS RELEASE

TITLE

DATE

☐ CONTRACTOR
☐ SUBCONTRACTOR
☐ SUPPLIER

COMPANY NAME

AUTHORIZED SIGNATURE

\$

AMOUNT RECEIVED

PRINTED NAME OF PERSON
SIGNING THIS RELEASE

TITLE

DATE

☐ CONTRACTOR
☐ SUBCONTRACTOR
☐ SUPPLIER

COMPANY NAME

AUTHORIZED SIGNATURE

\$

AMOUNT RECEIVED

PRINTED NAME OF PERSON
SIGNING THIS RELEASE

TITLE

DATE

☐ CONTRACTOR
☐ SUBCONTRACTOR
☐ SUPPLIER

This Lien Release form is provided by Labor & Industries as required under RCW 60.04.200

