

AFTER RECORDING RETURN TO:

NORTHWEST LIEN SERVICES, LLC
1406 NE JADE ST.
ISSAQUAH, WA 98029

CLAIM OF LIEN

SERVPRO OF EVERETT, MARYSVILLE, SKAGIT,
WHATCOM, ISLAND, KITSAP, GRAYS HARBOR, YAKIMA
Claimant.
VS
CANDACE DAVIS
(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 claimant: SERVPRO OF EVERETT, MARYSVILLE, SKAGIT,
WHATCOM, ISLAND, KITSAP, GRAYS HARBOR, YAKIMA
Address: 1830 BICKFORD AVE, STE 101, SNOHOMISH, WASHINGTON 98290
Telephone Number: (360) 243-8313
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: DECEMBER 18, 2025
3. Name of person indebted to the Claimant: CANDACE DAVIS, 1508 HOEHN RD
SEDRO WOOLLEY, WASHINGTON 98284
4. Description of the property against which a lien is claimed:
Address: 1508 HOEHN RD
SEDRO WOOLLEY, WASHINGTON 98284
Legal Description: THAT PORTION OF TRACT 10, DEITERS ACREAGE, SKAGIT CO.,
WASH, AS PER PLAT RECORDED IN VOLUME 3 OF PLATS, PAGE 53, RECORDS OF
SKAGIT COUNTY, WASHINGTON, DESCRIBED AS FOLLOWS: BEGINNING AT A
POINT ON THE SOUTH LINE OF SAID TRACT 10, WHICH IS 150 FEET WEST OF THE
SOUTHEAST CORNER OF TRACT 9 IN SAID PLAT; THENCE NORTHWESTERLY IN
A STRAIGHT LINE TO A POINT ON THE NORTHWESTERLY LINE OF SAID TRACT
10, WHICH IS 257 FEET SOUTHWESTERLY OF THE NORTHEASTERLY CORNER OF
SAID TRACT 9; THENCE SOUTHWESTERLY ALONG SAID NORTHWESTERLY LINE
85 FEET; THENCE SOUTHERLY IN A STRAIGHT LINE TO A POINT ON THE SOUTH
LINE OF SAID TRACT 10, WHICH IS 85 FEET WEST OF THE POINT OF BEGINNING;
THENCE EAST 85 FEET TO THE POINT OF BEGINNING; EXCEPT THAT PORTION
OF SAID; DESCRIBED AS FOLLOWS: SKAGIT County Parcel No: P64951
5. Name of owner or reputed owner (if not known state "unknown"): CANDACE I
DAVIS, 1508 HOEHN RD, SEDRO WOOLLEY, WASHINGTON 98284
6. The last date on which labor was performed, professional services were furnished;
Contributions to an employee benefit plan were due on material, or equipment was
furnished: JANUARY 08, 2025
7. Principal amount for which the lien is claimed: \$ 8,519.76 plus applicable lien fees
&/or attorney's fees, costs &/or interest.
8. If the Claimant is the assignee of this claim so state here: N/A

SERVPRO OF EVERETT, MARYSVILLE, SKAGIT, WHATCOM, ISLAND, KITSAP, GRAYS
HARBOR, YAKIMA
1830 BICKFORD AVE, STE 101
SNOHOMISH, WASHINGTON 98290
(360) 243-8313

By:

John Crivello
NORTHWEST LIEN SERVICES, LLC
JOHN CRIVELLO, MEMBER

1406 NE JADE ST., ISSAQUAH, WA 98029

AUTHORIZED AGENT FOR SERVPRO OF SERVPRO OF EVERETT, MARYSVILLE, SKAGIT,
WHATCOM, ISLAND, KITSAP, GRAYS HARBOR, YAKIMA

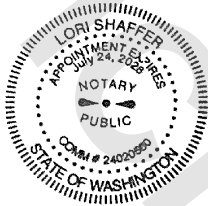
STATE OF WASHINGTON)
)ss

COUNTY OF KING)

JOHN CRIVELLO, being sworn, says: I am an authorized representative/employee of 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.

John Crivello

Subscribed and sworn to before me this 7TH DAY OF APRIL 2025



Lori Shaffer

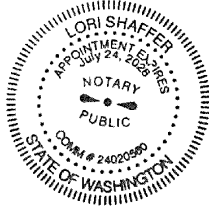
PRINTED NAME: LORI SHAFFER
NOTARY PUBLIC

In and for the State of Washington.
My commission expires: 7/24/2026

STATE OF WASHINGTON)
)ss
COUNTY OF KING)

On this 7th DAY OF APRIL 2025 before me personally appeared JOHN CRIVELLO, to me known to be the (president, vice president, secretary, treasurer, or other authorized officer or agent, as the case may be) of Northwest Lien Service, LLC, a Washington Limited Liability Company, that executed the within and foregoing instrument, and acknowledged said instrument to be the free and voluntary act and deed of said Company, for the uses and purposes therein mentioned, and on oath stated that he/she was authorized to execute said instrument and that the seal affixed is the corporate seal of said Company.

In Witness Whereof I have hereunto set my hand and affixed my official seal the day and year first above written.



Lori Shaffer

PRINTED NAME: LORI SHAFFER
NOTARY PUBLIC

In and for the State of Washington.
My commission expires: 7/24/2026

Order #24-00869 Dated: 4/04/25