



20250620092

06/20/2025 02:14 PM Pages: 1 of 2 Fees: \$304.50  
Skagit County Auditor

Return Address:

COAST CONSTRUCTION & RESTORATION LLC  
6702 69th Dr NE  
MARYSVILLE WA 98270

Please print or type information 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)

- 1. Claim of Lien
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

Reference Number(s) of Documents assigned or released:

Additional reference #'s on page \_\_\_\_\_ of document

Grantor(s) Exactly as name(s) appear on document

- 1. Sheri Stafford
- 2. \_\_\_\_\_

Additional names on page \_\_\_\_\_ of document.

Grantee(s) Exactly as name(s) appear on document

- 1. COAST CONSTRUCTION & RESTORATION LLC
- 2. \_\_\_\_\_

Additional names on page \_\_\_\_\_ of document.

Legal description (abbreviated: i.e. lot, block, plat or section, township, range)

Manufactured Home Only - 1975 Serial Number 03116SS3800 BARRINGTON 60X23 PARK VILLAGE  
Mobile Park Space Number 20 Tax Parcel: P25099

Additional legal is on page \_\_\_\_\_ of document.

Assessor's Property Tax Parcel/Account Number

assigned P25099

Assessor Tax # not yet

The Auditor/Recorder will rely on the information provided on this form. The staff will not read the document to verify the accuracy or completeness of the indexing information provided herein.

"I am signing below and paying an additional \$50 recording fee (as provided in RCW 36.18.010 and referred to as an emergency nonstandard document), because this document does not meet margin and formatting requirements. Furthermore, I hereby understand that the recording process may cover up or otherwise obscure some part of the text of the original document as a result of this request."

Signature of Requesting Party

Note to submitter: Do not sign above nor pay additional \$50 fee if the document meets margin/formatting requirements

CLAIM OF LIEN

Coast Construction & Restoration LLC, Claimant, vs Sheri Stafford, name of person indebted to claimant:

Notice is hereby given that the person named below claims a lien pursuant to Chapter 64.04 RCW. In support of this lien the following information is submitted:

1. Claimant's Information:  
Coast Construction & Restoration LLC  
6702 69th Dr NE  
Marysville, Washington 98270  
Telephone: 425-231-5385
2. Claimant started providing services on January 30<sup>th</sup>, 2025.

Claimant signed a contract dated January 10<sup>th</sup>, 2025 and was employed or furnished labor, services, equipment and/or materials under an agreement with, Sheri Stafford, 2725 E Fir St #20, Mount Vernon WA 98273

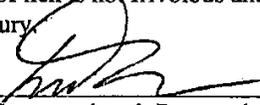
3. This Claim of Lien shall be filed against the property physically located at: 2725 E Fir St #20, Mount Vernon WA 98273

The property is legally described as: Manufactured Home Only 1975 Serial Number 031165S3800 Barrington 60X23 Park Village Mobile Park Space Number 20, Records of Skagit County Auditor; Situate in the City of Mount Vernon, County of Skagit, State of Washington Tax Parcel Number(s): P25099

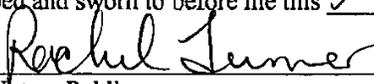
4. The Owner of the property is, Sheri Stafford, 2725 E Fir St #20, Mount Vernon WA 98273
5. The Claimant completed services on March 31<sup>st</sup>, 2025
6. The principal amount of the lien claimed is \$3,613.44

STATE OF WASHINGTON, COUNTY OF SKAGIT, ss.

Coast Construction & Restoration LLC, being sworn, says: I am the Claimant above named; I have read or heard 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.

  
 \_\_\_\_\_  
 Coast Construction & Restoration LLC  
 6702 69th Dr NE  
 Marysville, Washington 98270  
 Telephone: 425-231-5385

Subscribed and sworn to before me this 5<sup>th</sup> day of June, 2025.

  
 \_\_\_\_\_  
 Rachel Turner  
 Notary Public  
 State of Washington  
 My Commission Expires: 7/10/2027

