

Skagit County Auditor

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RETURN TO:

JOHN W. HICKS SCHACHT & HICKS, INC., P.S. PO BOX 1165 MOUNT VERNON WA 98273

DOCUMENT TITLE: Claim of Lien

GRANTOR: KIPP, TARA L.

GRANTEE: Wildflower Homeowner's Association *45 **

ABBREVIATED LEGAL DESCRIPTION:

Sauk Mountain View Estates North-Phase 1-Wildflower, Blk 1, Lot 15, Acres 0.06, (SWFC)

ASSESSOR'S TAX PARCEL NUMBER: P120320/4813-000-015-0000

WILDFLOWER HOMEOWNER'S)
ASSOCIATION,)
Claimant,)
vs.)
TARA L. KIPP,)
Owner.)

NOTICE is hereby given that the person named below claims a lien pursuant to Chapter 60.04 RCW. In support of this lien the following information is submitted:

CLAIM OF LIEN - 1

1) NAME OF LIEN CLAIMANT:

WILDFLOWER HOMEOWNER'S

ASSOCIATION

TELEPHONE NUMBER:

(360)856-4725

ADDRESS:

826 Metcalf Street PMB #45 Sedro Woollev WA 98284

2) This Claim arises out of the Sauk Mountain View Estates
North - Phase I - Wildflowers Declaration of Easement,
Reservations, and Restrictive Covenants, recorded May 9, 2003
under Auditor's File No. 200305090002 and the failure of the
Grantors to pay the Association dues as required pursuant to the
Sauk Mountain View Estates North - Phase I - Wildflowers
Declaration of Easement, Reservations, and Restrictive Covenants
above referenced. The Sauk Mountain View Estates North - Phase I
- Wildflowers Declaration of Easement, Reservations, and
Restrictive Covenants provides for the filing of a lien for the
failure to pay. Grantors have failed to pay through August 1,
2008 dues in the amount of \$658.30.

- 3) Name of person indebted to the Claimant: TARA L. KIPP.
- 4) Description of the property against which a lien is claimed: 1420 Wildflower Way, Sedro Woolley, Washington, 98284, legally described as follows:

LOT 15, SAUK MOUNTAIN VIEW ESTATES NORTH, PHASE 1, WILDFLOWER, ACCORDING TO THE PLAT THEREOF, AS RECORDED MAY 9, 2003, UNDER AUDITOR'S FILE NO. 200305090001, RECORDS OF SKAGIT COUNTY, WASHINGTON.

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SITUATE IN SKAGIT COUNTY, WASHINGTON.

Tax Parcel Number: P120320/4813-000-015-0000

- 5) Name of the owner or reputed owner: TARA L. KIPP.
- 6) The Association dues are payable pursuant to the invoices, a copy of which is attached.
- 7) Principal amount for which the lien is claimed is \$658.30.
- 8) If the Claimant is the assignee of this claim so state here: Not Applicable.

WILDFLOWER HOMEOWNER'S ASSOCIATION Claimant

By:___

Printed Name: Jamie Brill

Title; Secretary

By:

Printed Name: Pat Hardy

Title: Treasurer

Address:

826 Metcalf Street PMB#45

Sedro Woolley WA 98284

STATE OF WASHINGTON)

SS.

COUNTY OF SKAGIT

JAMIE BRILL and PAT HARDY, being first duly sworn on oath deposes and says:

We are the Secretary and Treasurer, respectively, of WILDFLOWER HOMEOWNER'S ASSOCIATION, the Claimant above named; we have read or heard the foregoing claim, read and know the contents thereof, and believe the same to be true and correct and

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that the claim of lien is not frivolous and is made with reasonable cause, and is not clearly excessive under penalty of perjury.

JAMIE BRILL - Secretary

WILDFLOWER HOMEOWNER'S ASSOCIATION

PAT HARDY - Treasurer

WILDFLOWER HOMEOWNER'S ASSOCIATION

SUBSCRIBED AND SWORN to on September ______, 2008, by Jamie Brill and Pat Hardy.



Printed name: KAY L. NECLEY

Notary Public in and for the State of
Washington, residing at: Mount Vern.

My appointment expires: 3-15-2012.

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