



200812180035
Skagit County Auditor

RETURN TO:

BMC WEST CORPORATION

12/18/2008 Page 1 of 2 10:02AM

PO BOX 7015

ISSAQUAH, WA 98027

BMC WEST CORPORATION

Claimant

VS.

HANSELL MITZEL LLC

Name of person indebted to claimant:

CLAIM OF LIEN

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.

Name of Lien **BMC WEST CORPORATION** Name of Owner **MARIS & MARY ALICE GROBINS**
Or

1. Claimant: PO BOX 7015

5. Reputed Owner: 23884 NOOKACHAMP HILLS DR

Address: ISSAQUAH, WA 98027

Address: MT VERNON, WA 98274

Telephone #: (425) 369-5630

Certified #: 7001 2510 0000 6572 8189

2. Date of which the claimant began to perform labor, provide professional services, supply or equipment or the date of which employee benefit contributions became due: NOVEMBER 30, 2007

3. Name of person indebted to the claimant: HANSELL MITZEL LLC

4. Description of the property against which a lien is claimed:

LOT 118, NOOKACHAMP HILLS PUD PHASE IIB, RECORDED UNDER AUDITOR'S FILE NO. 200508230082, BEING A PORTION OF SOUTHEAST QUARTER OF SECTION 25, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M., AND NORTHEAST QUARTER OF SECTION 36, TOWNSHIP 34 NORTH, RANGE 04 EAST, W.M., AND NORTHWEST QUARTER OF SECTION 31, TOWNSHIP 34 NORTH, RANGE 05 EAST, W.M., RECORDS OF SKAGIT COUNTY, STATE OF WASHINGTON.

TAX PARCEL #P123211

COMMONLY KNOWN AS:

23884 NOOKACHAMP HILLS DRIVE
MOUNT VERNON, WA

6. This last date on which labor was performed; professional services were furnished; contributions to an employee benefit plan were due; or material or equipment was furnished:

OCTOBER 20, 2008

7. Principal amount for which the lien is claimed is: \$1,466.32 + \$200.00 LIEN FEE = \$1,666.32

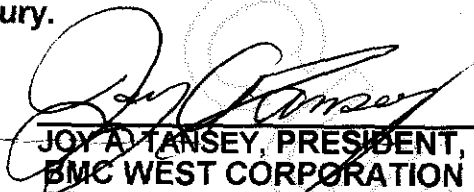
8. If the claimant is the assignee of this claim so state here: NONE

State of Washington, County
of

KING, ss.

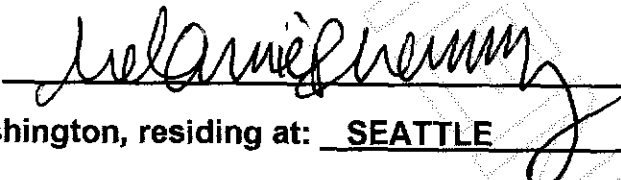
JOY A. TANSEY, (PRESIDENT OF CONSTRUCTION CREDIT CORP, AGENT FOR CLAIMANT) being sworn, says: I am the claimant (or attorney of the claimant or administrator, representative, or agent of the claimant or trustees of an employee benefit plan) above named; I have read or heard the foregoing claim, read 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.

MELANIE P. MEKKHAVONG
STATE OF WASHINGTON
NOTARY PUBLIC
MY COMMISSION EXPIRES
10-10-12



JOY A. TANSEY, PRESIDENT, AGENT FOR
BMC WEST CORPORATION
PO BOX 7015
ISSAQUAH, WA 98027
(425) 369-5630

Subscribed and sworn to before me this 17TH day of DECEMBER 2008



Notary Public in and for the State of Washington, residing at: SEATTLE

My Commission Expires: OCTOBER 10, 2012



200812180035
Skagit County Auditor