

Skagit County Auditor 11/2/2016 Page

1 of

\$74.00 2 1:06PM

After recording, return to (figure, Address, Zip):
THE ORCHARDS PUD HOMEOWNERS ASSN.
P.O. Box 1633
ANACORTES, WA 98221
CLAIM OF LIEN
Grantor (Name of person indebted to Claimant): ALAN CARLSON
Grantee (Claimant): THE ORCHARDS PUD HOMEOWNERS ASSOCIATION
Abbreviated Legal Description: 7 HE ORCHAROS PUD - LOT /
Assessor's Property Tax Parcel or Account No
Reference No(s) of Related Documents:
THE ORCHAROS PUD HOMEOUNERS ASSA
vs. ALAN CARLSON
Name of person indebted to Claimant
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:
1. Name of Lien Claimant: TITE ORCHAROS PUD HOMEOWNERS ASSOCIATION
Telephone Number: 360-982-2212 Address: 100 Box 1633
ANACORTES, WA 98221
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: [306057 1, 2016]
3. Name of person indebted to the Claimant: ALAN CARLSON
4. Description of the property against which a lien is claimed (Street address, legal description or other information that will reasonably describe the property): 4102 ORCHARD AICHUL ANACORTES, WA 9822)
5. Name of the owner or reputed owner (If not known state "unknown"):
6. The last date on which labor was performed; professional services were furnished; or contributions to an employee benefit plan were due; or material or equipment was furnished: 5PECIAL ASSESSMENT DUE AUGUST 1, 2016
(OVER)

7. Principal amount for which the lien is claim	ed is: \$327 PLUS \$1.50 ACCRUED
8. If the Claimant is the assignee of this claim s	so state here:
PATRICUS HOOVER, TREASURE	ANACORIES, WA 98221 CITY STATE TADDRESS STATE 7821 PHONE SS. 360-982-2212 , being sworn, says: I am the
Patricia Nove	ANACORIES WA 98221
STATE OF WASHINGTON, County of Skagit) SS. 360-982-2212 being sworn says: Lam the
claimant (or attorney of the claimant, or administrator,	representative, or agent of the trustees of an employee benefit
plan) above named; I have read or heard the foregoing c	laim, read and know the contents thereof, and believe the same
	rivolous and is made with reasonable cause, and is not clearly
excessive under penalty of perjury,	1 Patrija Hover
	O before mg on November 2,2016
CANDI NEWCOMBE	O before me on 110 versus 2, 201
NOTARY RUBLIC	/ and / Juntu
STATE OF WASHINGTON	Notary Public for Washington My appointment expires
COMMISSION EXPIRES	My appointment expires
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Field, Inc., 155 Wn.App. 434, 228 P.3d 1297 (2010): If the individual signing the Claim of Lien is making the C STATE OF WASHINGTON, County of	U notarial certificates should be completed. See Williams v. Athletic laim of Lien on his or her own behalf:) ss.
NOTE: Consider whether one of the following additional of Field, Inc., 155 Wn.App. 434, 228 P.3d 1297 (2010): If the individual signing the Claim of Lien is making the CSTATE OF WASHINGTON, County of I certify that I know or have satisfactory evide acknowledged that he/she/they signed this instrument for the uses and purposes mentioned in the instrument.	laim of Lien on his or her own behalf:
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