

AFTER RECORDING RETURN TO:

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

CLAIM OF LIEN

HECKMAN INC
Claimant.
VS
SHOEMAKER EXCAVATION INC
(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: HECKMAN INC
Address: PO BOX 1298, STANWOOD, WASHINGTON 98292
Telephone Number: (360) 772-1558
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: NOVEMBER 13, 2023
3. Name of person indebted to the Claimant: SHOEMAKER EXCAVATION INC.,
33004 S GERARDS RD, KENNEWICK, WASHINGTON 99337
4. Description of the property against which a lien is claimed:
Address: 1000 JASON LANE
MOUNT VERNON, WASHINGTON 98273
LEGAL DESCRIPTION: LOT: PLAT BLOCK: DESCRIBED AS FOLLOWS: DK 17: THE NORTHERLY 417 FEET OF THE PORTION OF THE SOUTH HALF OF THE NORTHWEST QUARTER OF THE SOUTHWEST QUARTER, LYING EASTERLY OF THE GREAT NORTHERN RAILWAY COMPANY'S RIGHT OF WAY, SECTION 17, TOWNSHIP 34 NORTH, RANGE 4 EAST, W.M., EXCEPT THE NORTH 30 FEET THEREOF AS CONVEYED TO THE CITY OF MOUNT VERNON FOR STREET PURPOSES BY DEED RECORDED UNDER AUDITOR'S FILE NO. 567014, AND ALSO EXCEPT THE EAST 30 FEET THEREOF AS CONVEYED TO THE CITY OF MOUNT VERNON FOR STREET PURPOSES BY DEED RECORDED UNDER AUDITOR'S FILE NO. 763629, PLAT LOT: PLAT BLOCK: DESCRIBED AS FOLLOWS: SKAGIT County Parcel No: P26005
5. Name of owner or reputed owner (if not known state "unknown"): PERDUE FOODS LLC, 31149 OLD OCEAN CITY RD, SALISBURY, MD 21804
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: DECEMBER 29, 2023
7. Principal amount for which the lien is claimed: \$141,363.00 plus applicable lien fees &/or attorney's fees, costs &/or interest.
8. If the Claimant is the assignee of this claim so state here:

HECKMAN INC

PO BOX 1298

STANWOOD, WASHINGTON 98292

(360) 772-1558

By: 

NORTHWEST LIEN SERVICES, LLC

JOHN CRIVELLO, MEMBER

1406 NE JADE ST.

ISSAQUAH, WA 98029

AUTHORIZED AGENT FOR HECKMAN INC

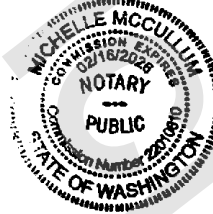
STATE OF WASHINGTON)
)ss

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 25th DAY OF MARCH 2024



Michelle McCullum

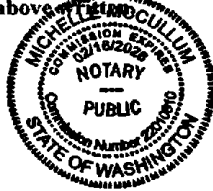
PRINTED NAME: MICHELLE MCCULLUM
NOTARY PUBLIC

In and for the State of Washington.
My commission expires: 2/16/2026

STATE OF WASHINGTON)
)ss
COUNTY OF KING)

On this 25th DAY OF MARCH 2024, 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.



Michelle McCullum

PRINTED NAME: MICHELLE MCCULLUM
NOTARY PUBLIC

In and for the State of Washington.
My commission expires: 2/16/2026

Order #24-000-193 Dated: 3/18/2024