

Skamania County, WA
Total: \$104.50 Pgs=2
LIEN
Request of: ROHILLCO BUSINESS SERVICES LLC
eRecorded by: Simplifile

2020-000121

01/21/2020 07:49 AM

Return Address:
RoHillCo Business Services, LLC
P.O. Box 7107
Bend, OR 97708-7107
541-639-8949

Claim of Lien

Indexing information required by the Washington State Auditor's/Recorder's Office. (RCW 36.18 and RCW 65.04) 1/97: (please print last name first)

Reference # (If applicable): 190T2875

Grantor(s) (Owner): (1) Lawing, Gary W. (2) Lawing, Linda L.

Grantee(s) (Claimants): (1) Precision Truss & Lumber, Inc. Add'l on pg ____

Legal Description (abbreviated): Lot 27 of the Hidden Ridge Subdivision 2018-000254

Assessor's Property Tax Parcel/ Account# 03073544102700, Skamania County

Precision Truss & Lumber Inc.
11550 SE Jennifer Street
Clackamas, OR 97030

Claimant >

vs. >
>

Leavitt Brothers Consulting LLC
2221 G Street
Washougal, WA 98671

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: Precision Truss & Lumber, Inc.

TELEPHONE NUMBER: (503) 656-2983

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: October 21, 2019

3. NAME OF PERSON INDEBTED TO THE CLAIMANT: Leavitt Brothers Consulting.

4. DESCRIPTION OF THE PROPERTY AGAINST WHICH A LIEN IS CLAIMED: 1142 NW Iman Loop Road, Stevenson WA, County of Skamania, Legally described as Lot 27 of the Hidden Ridge Subdivision 2018-000254, Parcel number 03073544102700.
5. NAME OF THE OWNER OR REPUTED OWNER (if not know state "unknown"): Gary and Linda Lawing – P.O. Box 1053, The Dalles OR 97058-9053.
6. THE LAST DATE ON WHICH LABOR WAS PERFORMED PROFESSIONAL SERVICE WERE FURNISHED: CONTRIBUTIONS TO AN EMPLOYEE BENEFIT PLAN WERE DUE; OR MATERIAL, OR EQUIPMENT WAS FURNISHED: October 21, 2019.
7. PRINCIPAL AMOUNT FOR WHICH THE LIEN IS CLAIMED IS: \$15,247.28 Including Interest and Fees.
8. IF THE CLAIMANT IS THE ASSIGNEE OF THIS CLAIM SO STATE HERE: N/A

X



(Claimant)

By: Tom Martin
Precision Truss & Lumber, Inc.
11550 SE Jennifer Street
Clackamas, OR 97015

STATE OF OREGON >

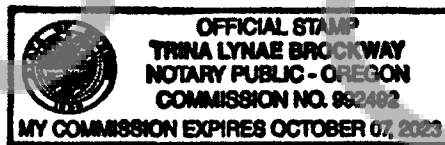
County of Clackamas >

I, Tom Martin, being sworn, says: I am 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 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.

X


By: Tom Martin, Sales Manager

Signed and sworn to before me on this 13th day of January, 2020





Print Name: Trina L Brockway
Notary Public in and for the State of Oregon
My appointment expires: October 7th, 2023

NOTE: THE CLAIM OF LIEN MUST BE FILED FOR RECORDING IN THE COUNTY WHERE THE REAL PROPERTY IS LOCATED NO LATER THAN NINETY (90) DAYS AFTER THE CLAIMANT HAS CEASED TO FURNISH LABOR, PROFESSIONAL SERVICES, MATERIALS OR EQUIPMENT OR THE LAST DATE ON WHICH EMPLOYEE BENEFIT CONTRIBUTIONS WERE DUE, IN ADDITION TO ANY NOTICE REQUIREMENTS THAT MAY BE PROVED BY LAW.