Recording requested by:	Space above reserved for use by Recorder's Office
When recorded, mail to:	Document prepared by:
Name:	Name
Address:	Address
City/State/Zip:	City/State/Zip
Claim of Lien	
State of	
County of	
I,	, being duly sworn, state the following:
In accordance with an agreement to provide labor and materials:	for material, I did furnish the following labor and/or
on the following described real property located in, commonly known a	
and legally described as:	
which property is owned by	, whose address is

\_\_\_\_\_\_, of a total value of \$ \_\_\_\_\_\_, of which there remains unpaid \$ \_\_\_\_\_\_, and I further state that I furnished the first of the items on the date of \_\_\_\_\_\_, and the last of the items on

the date of \_\_\_\_\_.

I hereby, under the laws of the State of \_\_\_\_\_\_, claim a lien against the above-described property in the amount of money, stated above, which remains unpaid to me.

Signature of Person Claiming Lien	-
Name of Person Claiming Lien:	
Address of Person Claiming Lien:	

## Notary Certification for Claim of Lien

State of \_\_\_\_\_ County of \_\_\_\_\_

On	(date),	(name of claimant), came before
me pe	rsonally, and duly sworn on oath, and under	r penalty of perjury, stated that he or she is the
claima	ant described in the above claim of lien and	that he or she has read the foregoing claim of
lien ar	nd has knowledge of and personally knows th	he foregoing statement of claim of lien which he
or she	subscribed is true and correct and is not fri	volous, nor clearly excessive, and is made with
reasor	able cause. Subscribed and sworn to before	me on the above noted date by the above noted
claima	ant, and proved to me on the basis of satisfa	actory evidence to be the person who appeared
before	e me.	

Notary Public Signature	
Notary Public, In and for the County of _	
State of	
My commission expires:	

Seal

## **Certificate Of Mailing**

I,\_\_\_\_\_, certify that on this date, \_\_\_\_\_, I have mailed a copy of this Claim of Lien by USPS certified mail, return receipt requested, in accordance with law, to: Name: \_\_\_\_\_\_

Address: \_\_\_\_\_

Signature of Person Mailing Claim of Lien

Name of Person Mailing Claim of Lien: