

REQUEST FOR CLAIM OF LIEN

Please prepare for our representative's signature, a Claim of Lien in accordance with the following information, which you may rely on, and at your customary rates of charge.

1. Date of first furnishing of labor/materials to jobsite by undersigned: _____
2. Date of last furnishing of labor/materials to jobsite by undersigned: _____
3. Our direct customer is _____
Address: _____
4. The nature of the services, labor and/or materials furnished by us: (If this is for specially fabricated materials, be sure to seek specific advice.)

5. Total value of what we furnished (do not include the value of work not done)
\$ _____
6. Balance owing for what we furnished: \$ _____
(Do not include costs not directly for improving the property. You may include unpaid finance charges.)
7. Job name, address, and legal description: _____

(If more space is needed, attached description)
8. A NOTICE TO OWNER was served on (date) _____. (attached copy, with the certified mail receipts)
9. Name and title of the officer that will execute (sign) the Claim of Lien

10. Attach copies of your contract and invoices (is any)

WE HEREBY CERTIFY the above described materials were used, or labor and services were performed, in the improvement of the real property named above; that no waiver or release of lien rights have been executed for the sums claimed; that all the above stated information is true and correct; that a proper license is held for the work claimed by the Lienor; and that if I am not

dealing directly with owner, the owner/contractor agreement is for more than \$2500.00.

FIRM/COMPANY NAME:

ADDRESS:

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ FAX: _____

EMAIL _____

SIGNATURE: _____ DATE: _____

PRINTED SIGNATURE: _____

Return to:

LAW OFFICES OF OATES & OATES, P.A.
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POMPANO BEACH, FL 33060
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