AFFIDAVIT AND FINAL WAIVER OF LIEN

(For use with final progress payment applications)

Notice: This Waiver is Contingent Upon Receipt of Payment to Follow

STATE OF	, COUNTY OF	, SS:	Date:
TO:			
OWNER:		Dro	oject No.:
OWINEII.			y Request No.:
		1 4	y ricquest no
ADCUITECT:			
ARCHITECT:			
DDO IFOTO			
PROJECTS:			
Contract/Subcont			
Scope of work: _			<u></u>
The undersigned b	peing duly sworn, deposes, c	ertifies and sav	s that: (i) he(she) is an
	ly authorized to make this Aff		
	ontractor; (ii) Contractor/Sub		
Owner or with		to furr	nish certain labor and/or
	(Name of Contractor)		
materials as follow	s:		
	ect; (iii) the final balance due	to Contractor/S	ubcontractor for its labor
	terial furnished to said Projec		Dollars
(\$	_); (iv) the payment of this an		•
	nis Affidavit and Final Waiver	,	
	iven to and for this amount, a		
	tractor of such payment; and		
right to a lien on ac	count of any work performed	ı, materiais or e	equipment turnished or

services rendered for said Project for which this Affidavit and Final Waiver of Lien is given.

FOR GOOD AND VALUABLE CONSIDERATION, and in anticipation of the payment to Contractor/Subcontractor of the amount set forth above and effective upon receipt of this amount, Contractor/Subcontractor, for itself and its employees, hereby waives and releases unto the Owner any and all rights to hold, assert, enforce or file any and all claims and liens which Contractor/Subcontractor now has or may have against the Project (including without limitation the real property on which such Project is located and the improvements thereon), for any and all labor performed, materials and equipment furnished, and services provided to or for the Project by or through Contractor/Subcontractor to the extent of the payment received for which this Affidavit and Final Waiver of Lien is given.

Date:	CONTRACTOR/SUBCONTRACTOR		
	·		
	Signature:		
	Name/Title:Acting for and on its beha		
o o-	G		
STATE OF)) SS:		
STATE OF)		
Subscribed and sworn to before r thisday of	ne, a Notary Public, in and for said County and State_, 2		
Notary Public, Signature	Printed Name		
My Commission Expires:	My County of Residence:		



THE LIEN RESOURCE LEADER

Free Downloadable Forms from the Leader in Online Lien Resources:



Preliminary Notices



Mechanics Liens



Lien Waivers



Lien Cancellations



Stop Notices



Miller Act Claims