

NOTICE TO CONTRACTOR
TO MAKE CLAIM AGAINST CONTRACTOR, AND
PAYMENT BOND OR SECURITY DEPOSIT

O.C.G.A. §13-10-60 et seq

Notice To: Prime Contractor

Address:

Sent via

Certified Mail, Return Receipt Requested No. _____;

Or Overnight Mail, Tracking Number: _____.

Claimant (Name & Address)

Amount Owed to Claimant:

\$ _____

Services

Description of labor or materials furnished to the Hiring Party:

Hiring Party

Name & Address of the party who contracted the Claimant, and who, by contract, owes the Claimant the Amount Claimed:

Improvement

Name and geographical location of the public improvement for which the labor or materials supplied:

In accordance with O.C.G.A. §13-10-1 et seq., the Claimant hereby provides you, as the reputed contractor, written notice of the amount claimed by Claimant and the name of the party to whom materials and/or labor was furnished or supplied (the above-identified Hiring Party).

The Claimant is owed the Amount Owed to Claimant, and has not been paid for the same. The Claimant seeks payment from the reputed contractor directly, above identified as the Prime Contractor, and onto its payment bond and payment bond surety.

Please further accept this Notice to Contractor to Make Claim Against Contractor, and Payment Bond or Security Deposit, as a formal demand that you provide to the Claimant the following: (i) any Notice of Commencement filed for this project; and (ii) a copy of the payment bond for this project. This demand is being made pursuant to O.C.G.A. §13-10-1.

These items should be delivered to the Claimant, care of:

Agent for Claimant
Signed by: _____

Title: _____

PROOF OF SERVICE AFFIDAVIT

I, _____, being duly sworn, deposes and says that I am over the age of 18 years old, and that on the ____ day of _____, 20____, I served the attached Notice to Contractor to Make Claim Against Contractor, and Payment Bond or Security Deposit to the following parties at these stated addresses:

[_____] Prime Contractor [_____] _____

I served the attached document:

[_____] By personally delivering the notice to the identified parties;

[_____] By First Class Certified or Registered Mail service, return receipt requested, postage prepaid.

[_____] By overnight delivery.

State of _____
County of _____

Sworn to and subscribed before me, undersigned Notary Public, on the date inscribed to the right of this verification.

Notary Public

Signed this ____ day
of _____, 20____.

Agent for Claimant
Signed by:

Title:
