

REQUEST FOR PREPARATION AND RECORDING OF



For assistance with Claims of Lien, provide the information required on this form and forward to **FLORIDA NOTICE CORPORATION, 9050 Pines Blvd. Suites 352 - Pembroke Pines, Florida 33024**

When received, Florida Notice Corporation will provide a completed form for the signature of the party submitting this request form and forwarded to that person for execution and recording. An envelope will be provided addressed to the court in the county where the property in question is located. An additional envelope will be provided for return of the document from the Court.

The fee for this service shall be \$150.00 plus forwarding costs if Florida Notice prepared a Notice to Owner previously, \$175.00 if client is in privity a Notice to Owner was not prepared. The fees do not include any negotiation of the lien on behalf of the lienor or any referral to an attorney for litigation

Once recorded, a Claim of Lien remains in effect for one (1) year. If the Lienor fails to initiate foreclosure proceedings within that year, the right to foreclose will lapse. Be aware that certain procedures are available to the owner of the property that can alter the sequence of events. Should those procedures be used by the owner, the Lienor should contact a qualified attorney" Florida Notice Corporation is not an insurer and any payments received are based solely upon the value of the services described and it is not the intention of the parties that Florida Notice Corporation assume responsibility for any loss occasioned by malfeasance or misfeasance in the performance of the services under this contract, or for any loss or damage sustained by virtue of the relationship herein established. If there shall at any time be or arise any liability on the part of Florida Notice Corporation by virtue of this agreement or because of the relation herein established whether due to the negligence of Florida Notice Corporation or otherwise such liability is and shall be limited to sum of \$100.00 which sum shall be paid and received as liquidated damages. Such liability as herein set forth is fixed as liquidated damages and not as a penalty and liability shall be complete and exclusive. In the event that you (the customer) desire for Florida Notice Corporation to assume greater liability for the performance of its services hereunder, a choice is hereby given of obtaining full or limited liability by paying an additional amount under a graduated scale of rates proportioned to the responsibility. An additional rider shall be attached to this Agreement setting forth the additional liability of Florida Notice Corporation and the additional charge. The rider and additional obligation shall in no way be interpreted to hold Florida Notice Corporation as an insurer."

THE RECORDING OF AN IMPROPER CLAIM OF LIEN CAN RESULT IN SIGNIFICANT ADVERSE EFFECTS. IT IS HIGHLY RECOMMENDED TO HAVE YOUR CLAIM OF LIEN REVIEWED BY A QUALIFIED ATTORNEY PRIOR TO RECORDING.

DATE: _____

1. NOTICE NUMBER: _____
(NOTE: IF YOU ARE IN PRIVITY WITH THE OWNER, YOU MUST PROVIDE A COPY OF YOUR CONTRACT.)
2. FIRST DAY PROVIDING LABOR, SERVICES OR MATERIALS: _____
3. LAST DAY PROVIDING LABOR, SERVICES OR MATERIALS: _____
4. TOTAL CONTRACT PRICE (Including Extras): \$ _____
5. TOTAL UNPAID BALANCE NOW DUE: \$ _____
6. DATE NOTICE TO OWNER RECEIVED BY OWNER: _____
7. DATE NOTICE TO OWNER RECEIVED BY CONTRACTOR _____

FIRM: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____

E-MAIL ADDRESS: _____

KNOW ALL MEN BY THESE PRESENTS:

The above named authority, hereinafter referred to as PRINCIPAL, in the County of _____ State of Florida , do(es) appoint **ROBERT L. JOHNSTON** his/her true and lawful attorney. In principal's name, and for principal's use and benefit said attorney is authorized hereby to prepare and record a Claim of Lien based on the information provided on this form and previously furnished. Giving and granting to said attorney full power and authority to do all and every act and thing whatsoever requisite and necessary to be done relative to any of the foregoing as fully to all intents and purposes as principal might or could do if personally present.

All that said attorney shall lawfully do or cause to be done under the authority of this power of attorney is expressly approved.

AUTHORIZED BY: _____ TITLE: _____
(Please Type or Print)

AUTHORIZED SIGNATURE: _____
(NOTE: The party indicated above is the party who will sign the Claim of Lien.)