Prepared by, recording requested by and return to:

| Name:    |      |
|----------|------|
| Company: |      |
| Address: |      |
|          | <br> |

Phone: Fax:\_\_\_\_\_

Above this Line for Official Use Only

#### AFFIDAVIT OF LIEN BY ORIGINAL CONTRACTOR

State of Texas || County of \_\_\_\_\_

## <u>NOTICE: THIS IS NOT A LIEN</u> THIS IS ONLY AN AFFIDAVIT CLAIMING A LIEN

| The Claimant (Name)  | Amount of Claim<br>\$  |
|--|--|
| (Mailing Address)  | General statement of kind of work done and/or materials furnished ( <b>Services</b> ):                                     |
| (Physical Address)   |  |
| The Property Owner<br>(Name & Address of Owner or Reputed Owner) | The Services were performed in<br>construction of improvements at the<br>following described property ( <b>Property</b> ): |
| Attachments to this Affidavit of Lien Include                    | 2:   |

| Exhibit A: | Affidavit of Delivery of this Affidavit of Claim to the Owner |
|------------|---|
| Exhibit B: |   |
| Exhibit C: |   |

### BEFORE ME, the undersigned authority, personally came and appeared , a person of the full age of majority, who upon

his/her oath did depose and state the following:

- A. That he/she is an authorized and disclosed agent of the above-identified Claimant. As the authorized and disclosed agent of the Claimant, he/she has been provided with the facts related to the claim asserted herein, and to the best of his/her knowledge, information and belief, the facts set forth herein are true and correct. He/she is competent and authorized to make this affidavit.
- B. The Claimant is above-identified, as is its mailing address and physical address. The Claimant was the Original Contractor on the project in question;
- C. Under its contract with the above-identified Property Owner, the Claimant agreed to provide the above-described Services for the installation of improvements to the above-described Property.
- D. The owner or reputed owner of the real property above-described and made subject to this Affidavit of Lien is above-identified as the Property Owner, as the owner's mailing address.
- E. The real property sought to be charged with a lien is the property above-described as the Property.
- F. The total amount due to the Claimant is above-identified as the Amount of Claim. This amount is just, due and correct, after allowing all credits, offsets and payments. The Claimant claims a lien on the Property and its improvements to secure payment of its Amount of Claim.
- G. A copy of this Affidavit of Lien was mailed to the Property Owner as per the Affidavit of Delivery attached to this Affidavit of Lien as Exhibit A.
- H. The additional exhibits attached to this Affidavit of Lien (if any) are true and correct copies of the documents, the documents themselves offering the best evidence of its contents.

| STATE OF   |            |                        |
|--|------------|------------------------|
| COUNTY OF  |            | Signed this day        |
|  | of         | Signed this day, 20    |
| BEFORE ME, undersigned Notary Public, personally                         |            |                        |
| came and appeared,   |            |                        |
| came and appeared, known to me to be the person whose name is subscribed |            |                        |
| to the foregoing instrument and acknowledged to me that                  |            |                        |
| the facts asserted therein were true, correct and accurate               |            |                        |
| to the best of his/her information and belief, and that                  |            | Agent for the Claimant |
| he/she executed the document for the purposes stated                     | Signed by: |                        |
| therein, and in the capacity stated therein, and as the act              | Title:     |                        |
| and deed of said Claimant.   |            |                        |
| Subscribed and sworn to before me, on the day of                         |            |                        |
| , 20 .   |            |                        |
| , *  |            |                        |
|  |            |                        |
|  |            |                        |
|  |            |                        |
| Notary Public  |            |                        |

#### EXHIBIT A

#### PROOF OF SERVICE AFFIDAVIT

I, \_\_\_\_\_, being duly sworn, deposes and says that I am over the age of 18 years old, that this affidavit is made upon my own personal knowledge, and that on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I served the attached Affidavit of Lien to the following party at these stated addresses:

[\_\_\_\_] Property Owner

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.

| State of<br>County of  |            | of | Signed this day, 20    |
|--|------------|----|------------------------|
| Sworn to and subscribed, after being placed<br>under oath, before me, undersigned Notary<br>Public, on the date inscribed to the right of this<br>verification, acknowledgement and declaration. | Signed by: |    | Agent for the Claimant |
| Notary Public  | Title:     |    |                        |



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