

CONTRACTOR'S FINAL LIEN WAIVER

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OWNER'S CONTRACT NO.: _____ ENGINEER' PROJECT NO.: _____

AGREEMENT DATE: _____

CONTRACT TITLE: _____

To: _____ (Owner)

APPLICATION FOR FINAL PAYMENT

The undersigned hereby certifies that the amount owed set forth below constitutes the entire value of all work performed and services rendered by, through or under the undersigned with respect to the project not heretofore paid for up to and including the period covered by the above Application for Final Payment; that all work covered by such Application has been incorporated into the project and title thereto has passed to the Owner free and clear of all liens, claims, security, interests or encumbrances; and that no work covered by such Application has been acquired subject to an agreement under which any interest therein or an encumbrance thereon is retained by the seller or any other person. In consideration of payment of the requisition, the undersigned hereby releases the Owner from all claims of lien which the undersigned has regarding the Project.

The undersigned, in order to induce the Owner to pay the requisition, hereby represents that it has paid or will pay from the proceeds of the requisition all sums due to those parties who have performed work or provided materials to the undersigned in connection with the Project, and that it will on request of the Owner provide written evidence of the discharge by the undersigned of its obligations to such parties.

Executed under seal as of this _____ day of _____, 20__.

Amount Owed to Contractor by Owner as Final Payment:

\$ _____ (total value of project including change orders)

Amount Unpaid From Previous Application for Payment:

\$ _____

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From: _____ (Contractor)

Authorized Representative Signature

Name and Title (printed)

NOTARY:

Then personally appeared the above named _____ and acknowledged the foregoing to be the free act and deed of the above-named Contractor, before me.

Subscribed and sworn to on the _____ day of _____, 20__.

Notary Public: _____

My Commission Expires: _____