

Recording Requested By:

Name:

Address:

When Recorded Mail To:

Name:

Address:

SPACE ABOVE THIS LINE FOR RECORDERS USE

PARTIAL RELEASE OF MECHANICS' LIEN

THE UNDERSIGNED, _____, (USE NAME AS PRINTED ON CONTRACTOR'S LICENSE), HEREBY PARTIALLY RELEASES AND DISCHARGES THE MECHANICS' LIEN CLAIMED BY:

Claimant: _____

AGAINST:

Owner: _____

AFFECTING PROPERTY COMMONLY KNOWN AS:

Address: _____

WHOSE LEGAL DESCRIPTION (IF AVAILABLE) IS:

WHICH LIEN WAS RECORDED ON _____, ____ (Date), AT THE OFFICE OF THE COUNTY RECORDER OF _____ COUNTY, IN BOOK _____ OF THE OFFICIAL RECORDS, PAGE _____, AND/OR AS INSTRUMENT NUMBER _____. SAID LIEN CONTINUES IN FULL FORCE AND EFFECT AS TO THE REMAINING UNPAID BALANCE OF \$ _____.

DATE: _____

(Signature of Claimant or Authorized Agent)

(ATTACH NOTARIAL ACKNOWLEDGMENT)