

LIEN AGENT PRE-APPOINTMENT WORKSHEET

PROPERTY TYPE (Required):

1-2 Family Dwelling Other

OWNER INFORMATION (* = Required Information)

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

CONTRACTOR INFORMATION (* = Required Information)

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

PROJECT (PROPERTY) INFORMATION (* = Required)

*Tax Map, Block, and Lot of Property (Get from Tax Office): _____

*Other Legal Description (Get from Tax Office): _____

*Project Street Address: _____

*City: _____ *State: _____ *Zip: _____

*Parcel ID Number (Get from Tax Office): _____

PRE-PERMIT WORKERS (* = Required)

General Contractor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Land Surveyor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Architect:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Engineer:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Sub-Contractor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Sub-Contractor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Sub-Contractor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Sub-Contractor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

Sub-Contractor:

*First: _____ *Last: _____

*Street Address (Not PO Box): _____

*City: _____ *State: _____ *Zip: _____

Email (Optional): _____

DATE OF FIRST FURNISHING:

Date that first improvements (such as landscaping) or building materials are furnished to site

Date of First Furnishing: _____

FILING NOTIFICATION ALERT EMAIL ADDRESSES:

Email addresses used to notify owner, contractor, and any other interested parties of any claims against the property. (Not sure how many interested parties you may specify, 3 blanks are provided in this worksheet.)

Owner Email: _____

Contractor Email: _____

Interested Party #1 _____

Interested Party #2 _____

Interested Party #3 _____