**Subcontractors and Materials Supplier’s**

**Final Unconditional Waiver of Lien**

***Subcontractors Name Here***

**Amount Paid:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Total Contract Value Paid in Full**

##### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly sworn, deposes and says that he/she/they make(s) this affidavit on behalf of *Sub Contractors Name Here,* having entered into agreement with *BHL SERVICES, INC* the General Contractor for the construction of Aspen Dental at the premises of the Owner located at *Anywhere, USA* that all labor materials and services committed for have been fully paid and indebtedness discharged to the date of this affidavit. Furthermore, for and in consideration of in full, paid to the undersigned, the receipt whereof is hereby acknowledged, the undersigned does hereby waive, release and relinquish any and all claims or right of lien which the undersigned may now have upon the premises above described, for labor and material, general supervision of construction or alteration, and/or otherwise.

This form will not be accepted unless completed in full and MAILED to: *BHL SERVICES, IN, 5517-21st Ave. W, Suite B, Bradenton FL 34209.* Or hand delivered at the job site. We require an officer or owner signature, date and stamp of notary.

Liability to the State of ***Name of State, in which the Aspen Office is being built*** for sales and/or use tax, where applicable, has been discharged.

Subscribed and sworn to me by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This \_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_, 200\_\_ Sign

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Title

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Name and address of Subcontractor here*

Notary Public

My commission expires \_\_\_\_\_\_\_\_\_\_\_

County of:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

State of:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**This form will not be accepted unless completed in full.**