

NEW YORK BOND FILING AGENT

52 James Street – 5th FL
Albany, NY 12207

Bond Discharging Mechanic's Lien

We request New York Bond Filing Agent prepare and file a Mechanic's Lien Discharge Bond on our behalf. The information we provided is true and correct. We assume responsibility in the event information we provided is incorrect.

- 1- Petitioner's Exact Name (or Entity): _____
- 2- Our Address: _____ Suite/FL _____ City _____ State _____ Zip _____
- 3- Our Telephone #: _____ Email Address _____
- 4- Officer's Name (Member of the Entity): _____
- 4a- Officer's Title (Member, President, Corporate Secretary, Etc.): _____
- 5- What is your role in the situation (Property owner, General Contractor, Sub, Etc.): _____

- 6- Address of Property Liened: _____ City _____ State _____
- 7- Party Who Filed the Lien: _____
- 7a- Their Address: _____ City _____ State _____ Zip _____
- 8- Date Lien was Filed: _____
- 9- Amount of Lien: \$ _____
- 10- Do you have a copy of the Lien? (A copy of the Lien is required for filing.) _____ (YES / NO)
- 11- Have you obtained the Surety Bond? _____ (YES / NO) If not, we can refer you to a Surety Company.

I/We agree to pay New York Bond Filing Agent **\$850.00** for their services. I/We agree that services commence upon their receipt of this document. I/We are aware that New York Bond Filing Agent is a Filing Agent and not a party to this action. I/We agree New York Bond Filing Agent is not a law firm, and our employees are not acting as your attorney.

Signed: _____ Date _____

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PLEASE FOLLOW INSTRUCTIONS:

Filing Cost is \$850.00

Credit Card #: _____ Expiration Date: _____

Billing Address: _____

Zip Code: _____ CCV Code (3 or 4 digit code): _____

Email Intake document and this form to:

Info@NewYorkBondFiling.com

If paying by check email/fax with this document

LIMITED POWER OF ATTORNEY – DISCHARGING MECHANIC’S LIEN

Applicant / Petitioner, appoints the following as my Attorney-in-Fact, whom I trust with a specific financial act or acts immediately upon the authorization of this form, and I grant the power to act as if I were personally present to

Jennifer Spinning (Name of Attorney-in-Fact), residing at **52 James Street – 5th FL, Albany, NY 12207**, employee of **New York Bond Filing Agent**, grant the Attorney-in-Fact the legal authority for the specific financial act, listed below, on my behalf that can be any power legal under law in the State of New York.

The specific financial act I grant my Attorney-in-Fact to sign on my behalf is: **Discharging of Mechanic’s Lien Bond.**

This Limited Power of Attorney is valid for the filing of the Discharging of Mechanic’s Lien Bond; upon completion of the filing, this Power of Attorney is no longer valid.

This is to certify that I am officer of:

(Name of Entity),

Jennifer Spinning of New York Bond Filing Agent is our authorized agent for the purpose of filing a Mechanic’s Lien Discharge Bond on our behalf.

Date: _____

Name: _____

Title: _____