NEW YORK BOND FILING AGENT

50 East 42nd Street - Suite 2600 New York, NY 10017

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 Nam	e (or Entity):	·····	
2- Our Address:	Suite/FL	City	StateZip
3- Our Telephone #:	Email A	Address	
4- Officer's Name (Memb	er of the Entity):		
4a- Officer's Title (Member	, President, Corporate Secretary, Etc.): _		
5- What is your role in the	e situation (Property owner, General Con	tractor, Sub, Etc.):	
6- Address of Property L	ened:	City	State
7- Party Who Filed the Li	en:		
7a- Their Address:		City	StateZip
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	O) If not, we can re	fer you to a Surety Company.
I/We agree to pay New York	Bond Filing Agent \$850.00 for their service	s. For Bonds filed in	New York County, there is a
\$250.00 surcharge. Rejection	ns will incur a \$250.00 charge to resubmit for	or filing. I/We agree	that services commence upon their
receipt of this document. I/W	e are aware that New York Bond Filing Age	ent 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 yo	our attorney.

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PLEASE FOLLOW INSTRUCTIONS:

Filing Cost is \$850.00 For Bonds filed in New York County, there is a \$250.00 surcharge.

Rejections will incur a \$250.00 charge per resubmission.

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 50 East 42nd Street - Suite 2600, New York, NY 10017, 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: