

Space above this line for recorder's use only

Prepared by, recording requested by and
return to:

CLAIM FOR LIEN

770 ILCS 60/7 and 60/28

STATE OF ILLINOIS
COUNTY OF

Claimant / Lienor	
Owner	
Amount claimed	\$
PIN	

("Claimant") claims a lien under 770 ILCS 60/7 and 60/28 upon the real property and improvements described below, in the amount stated below, for labor, services, equipment or materials furnished for the improvement of that property, and states:

1. Claimant.

2. Owner or reputed owner of the property.

3. Person who contracted with Claimant.

Date of the contract: _____

4. Property subject to the lien.

Legal description: _____

PIN: _____

5. Labor, services, equipment or materials furnished.

First furnished: _____

Last furnished: _____

6. Amount claimed.

After deducting all just credits and offsets, the amount claimed is \$

_____.

Contract amount (agreed price or reasonable value of the labor and materials)	\$ _____
---	----------

Less payments received	\$ _____
------------------------	----------

Amount claimed, after deducting all just credits and offsets	\$ _____
---	-----------------

- 7.** This claim for lien is filed within four months after the completion of Claimant's contract, or of the extra or additional work or materials furnished under it (770 ILCS 60/7(a), 60/28).
- 8.** The amount claimed is the balance due to Claimant after allowing all credits (770 ILCS 60/7(a)).
- 9.** Claimant also claims interest on the amount claimed at the rate of 10% per annum from the date it became due (770 ILCS 60/1(a), 60/21(a)).

- 10.** The lien extends to every estate, right of redemption or other interest the owner had in the land when the contract was made or acquires later, and it attaches as of the date of the contract (770 ILCS 60/1(a)).

The undersigned, being first duly sworn, states that he or she is the authorized representative, the claimant named above; that he or she is authorized to make this Claim for Lien on its behalf; that he or she has read it and knows its contents; and that the statements in it are true of his or her own knowledge.

CLAIMANT:

_____	_____
By (signature)	Date
_____	_____
Printed name	Title

STATE OF _____

COUNTY OF _____

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20_____, by _____, authorized representative, who is personally known to me or who produced _____ as identification.

Notary Public (signature)

My commission expires

Notary's printed or typed name

(Notary seal)