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RELEASE AND CANCELLATION OF CLAIM OF LIEN

O.C.G.A. § 44-14-362

STATE OF GEORGIA

COUNTY OF

Claimant / Lienor	_____
Owner	_____
Releases	Claim of Lien recorded _____
Tax Parcel ID	_____

KNOW ALL PERSONS BY THESE PRESENTS that
_____ ("Claimant"), whose address is
_____, is the claimant under that certain Claim of
Lien recorded on _____ in the official records of _____ County,
Georgia, against the real property described below, owned by
_____:

Legal description: _____

Tax Parcel ID: _____

Claimant acknowledges full satisfaction of the claim secured by that lien, and hereby releases, discharges and cancels the lien and the Claim of Lien of record, and authorizes and directs the Clerk of Superior Court (county where the property is located) to cancel it of record.

The claim of lien described above has been paid and satisfied. The undersigned releases it and authorizes and directs the Clerk of Superior Court to cancel it of record.

CLAIMANT:

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

STATE OF _____

COUNTY OF _____

On this _____ day of _____, 20_____, before me, the undersigned notary public, personally appeared _____, authorized representative, personally known to me or proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the foregoing instrument, and acknowledged that he or she executed it in that capacity for the purposes stated in it.

_____	_____
Notary Public (signature)	My commission expires

Notary's printed or typed name	(Notary seal)