

Maine Notice of Claim Against Bond

Sent To:

[_____] **ORIGINAL CONTRACTOR**
(Name & Address)

[_____] **BONDING COMPANY**
(Name & Address)

AMOUNT OF CLAIM:
Balance unpaid, and amount of the claim:

\$ _____

CLAIMANT (Name & Address)

Party who hired CLAIMANT (“**HIRING PARTY**”):

PROPERTY Subject to the Lien:
(Give address and/or Legal Property Description and/or
identification of state project where work performed)

Description of Labor, Materials, Services, etc. provided
to the Property by Claimant (“**SERVICES**”):

YOU ARE HEREBY NOTIFIED THAT THE ABOVE-IDENTIFIED AND UNDERSIGNED CLAIMANT HAS NOT BEEN PAID IN FULL, AND INTENDS TO ENFORCE ITS RIGHTS UNDER MAINE PUBLIC WORKS SURETY BOND LAW, 14 M.R.S.A. § 871.

THE UNDERSIGNED CLAIMANT HAS FURNISHED LABOR, SERVICES, EQUIPMENT AND/OR MATERIAL OF THE GENERAL DESCRIPTION ABOVE PROVIDED AND IDENTIFIED AS "SERVICES." SERVICES WERE FURNISHED FOR THE BUILDING, STRUCTURE, OR OTHER WORK OF IMPROVEMENT LOCATED AT THE ABOVE-DESCRIBED PROPERTY. THE PERSON OR FIRM WHO REQUESTED SUCH SERVICES IS ABOVE-IDENTIFIED AS THE HIRING PARTY. THE UNPAID BALANCE AND AMOUNT OF THIS CLAIM IS ABOVE IDENTIFIED AS THE AMOUNT OF CLAIM.

_____ Agent for CLAIMANT
Duly Authorized
signed by: _____
title: _____

DATED: ____ / ____ /20 ____

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PROOF OF SERVICE AFFIDAVIT

I, _____, declare that I served copies of the above MAINE NOTICE OF CLAIM AGAINST BOND to the original contractor, and if indicated, to the bonding company, at the addresses shown, on ____ / ____ /20 ____.

I served said Notice by:

Delivery to the addresses shown by Certified or Registered Mail Service, postage prepaid, and return receipt requested;

Personal delivery;

I declare under penalty of perjury that the foregoing is true and correct.

Executed in the State of _____, and County of _____.

_____ Agent for CLAIMANT
signed by: _____
title: _____