

Notice of Furnishing

Return To:

CLAIMANT

Name and Address of Party who provided the Services to the Project, and who is delivering this notice.

Designee

Name and Address of Designee from Notice of Commencement

General Contractor

Name and Address of general contractor on the Project.

Property Owner or Tenant

Name and Address of Property Owner or Tenant

Hiring Contractor

Name and Address of party that hired the Claimant

Description of labor and/or materials that Claimant is providing to the project (**Services**):

Property where Services are being provided (**Property**) (legal property description):

Notice of Commencement recorded in records for State of Michigan,

County of _____;

Liber _____ on page _____

[] Copy is Attached

PLEASE TAKE NOTICE that the undersigned and above-identified Claimant is furnishing to the above-named Hiring Contractor the above-described Services in connection with the improvements to the real property above-described as Property, and described in the Notice of Commencement, if any, recorded and identified on this Notice of Furnishing.

WARNING TO OWNER: THIS NOTICE IS REQUIRED BY THE MICHIGAN CONSTRUCTION LIEN ACT. IF YOU HAVE QUESTIONS ABOUT YOUR RIGHTS AND DUTIES UNDER THIS ACT, YOU SHOULD CONTACT AN ATTORNEY TO PROTECT YOU FROM THE POSSIBILITY OF PAYING TWICE FOR THE IMPROVEMENTS TO YOUR PROPERTY.

SIGNATURE ON FOLLOWING PAGE

Signed this ____ day
of _____, 20 ____.

Agent for THE CLAIMANT

Signed by: _____

Title: _____

PROOF OF SERVICE AFFIDAVIT

I, _____, being duly sworn, deposes and says that I am over the age of 18 years old, that this affidavit is made upon my own personal knowledge, and that on the ____ day of _____, 20____, I served the attached Notice of Furnishing to the following parties at these stated addresses:

[] Designee

[] General Contractor

[] Property Owner or Tenant

[] _____

I served the attached document:

[] By personally delivering the notice to the identified parties;

[] By First Class Certified or Registered Mail service, return receipt requested, postage prepaid.

Signed this ____ day
of _____, 20____.

Agent for the Claimant

Signed by: _____
Title: _____