



Providing lien filing and bond claim notices for construction projects throughout the tri-state region

CCA Members

INITIAL BOND CLAIM NOTICE INTAKE SHEET

Your Name: _____
Company Name: _____
Position with Company: _____
New York Address: _____
Telephone Number: _____
Facsimile Number: _____
Email Address: _____
Date: _____

- 1 . Is the Project a Public or Private Improvement: [] Public [] Private
- 2 . If Public, what is the name of the public agency, municipality, authority, etc.:
_____.
- 3 . If Public, what is the public agency, municipality, authority's:
Project Name: _____
Contract #: _____
Description of the public improvement: _____

General Description of the contract:

- 4 . If Private, what is the property address and Section, Block and Lot(s) of the project:
a . Address: _____
b . Section: _____ Block: _____ Lot(s)
- 5 . If Private, what is the name and address of the owner of the property:
a . Name: _____
b . Address: _____
- 6 . What is the name and address of the contractor for whom you furnished labor and materials: _____.

Tri State Lien, Inc.

11 Martine Avenue, White Plains, New York 10606

Phone: (877) 543-6488 • Fax: (914) 686-4493 • www.tristateliens.com



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INITIAL BOND CLAIM NOTICE INTAKE SHEET

- 7 . What is the name and address of the general contractor and/or construction manager for the project: _____
- 8 . What is the name and address of the bonding company issuing the payment bond for the project: _____.
- 9 . What is the payment bond number: _____.
- 1 0 .Describe the labor performed: _____.
- 1 1 .Describe the materials furnished: _____.
- 1 2 .What is the amount due for labor and materials actually furnished to the project (include retainage):
 - a . Due: _____
- 1 3 .What was the date when the money was due: _____.
- 1 4 .What is the date the last items of work were performed and materials were furnished: _____.

By signing below, Customer agrees to Tri State Lien, Inc.'s terms and conditions and to have Tri State Lien, Inc. act as its agent in connection with the service of its initial bond claim notice, states that all information provided is accurate and that Tri State Lien, Inc. can rely on the accuracy of the information provided by Customer, assumes all responsibility for all information provided and acknowledges that Tri State Lien, Inc. is not acting as an attorney, does not guaranty the timely filing of any Initial Bond Claim Notice and limits its liability to the cost paid by Customer to Tri State Lien, Inc.

By: _____
Name:
Title