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2001-06-12 14:55:54
Cook County Recorder 15.50

GEORGE E. COLE®
LEGAL FORMS

No. 363 REC
February 1996



**WAIVER OF LIEN
SUBCONTRACTOR'S COMPLETE**

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FOR THE PROTECTION OF THE OWNER, THIS RELEASE SHOULD BE FILED WITH THE RECORDER OR THE REGISTRAR OF TITLES IN WHOSE OFFICE THE CLAIM FOR LIEN WAS FILED.

STATE OF ILLINIOS

COUNTY OF COOK } SS.

To All Whom It May Concern:

WHEREAS, the undersigned, HARMONS MOTOR SERVICES INC
has been employed by PODEMOS EXC + SPF DEVELOPMENT,
contractor, to furnish HAULING,
for the premises owned by 6225 S. KENWOOD. JOINT VENTURE,
and known as 6225 S. KENWOOD,
in the CITY of CHICAGO, County of COOK,
Illinois, and legally described as: 6225 S. KENWOOD - CHICAGO, IL

Permanent Real Estate Index Number(s): 20-14-414-006-0000
Address(es) of premises: 6225 So. KENWOOD.

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NOW, THEREFORE, the undersigned, for and in consideration of the sum of _____

_____ Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged by the undersigned, does hereby waive and release any and all lien or claim of or right to lien under the statutes of the State of Illinois relating to mechanics' liens, with respect to and on the above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys or other considerations due or to become due from the owner, on account of labor, services, material, fixtures, apparatus or machinery heretofore furnished, or which may be furnished at any time hereafter, by the undersigned, to or on account of the said contractor or the said owner, for the above-described premises.

Dated this _____ day of _____, 19 _____.

[affix corporate seal here]

ATTEST:

(Name of sole ownership, corporation, or partnership)

(SEAL)

(Signature of secretary of corporation)

(Signature of sole owner or of authorized representative of corporation or partnership)

State of Illinois, County of _____ } ss.

The affiant, _____,
being first duly sworn, on oath deposes and says that he is _____

_____ the claimant; that he has read the foregoing waiver of lien and knows the contents thereof; and that all the statements therein contained are true.

Subscribed and sworn to before me this _____ day of _____, 19 _____,

Notary Public

This document was prepared by _____
(Name and Address)

Mail to: _____
(Name and Address)

(City)

(State)

(Zip Code)

Or Recorder's Office Box No. _____

0010509496 Page 2 of 4

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NOW, THEREFORE, the undersigned, for and in consideration of the sum of Twenty Six Thousand + Seventy Dollars, and other good and valuable considerations, the receipt whereof is hereby acknowledged by the undersigned, does hereby waive and release any and all lien or claim of or right to lien under the statutes of the State of Illinois relating to mechanics' liens, with respect to and on the above-described premises, and the improvements thereon, and on the material, fixtures, apparatus or machinery furnished, and on the moneys or other considerations due or to become due from the owner, on account of labor, services, material, fixtures, apparatus or machinery heretofore furnished, or which may be furnished at any time hereafter, by the undersigned, to or on account of the said contractor or the said owner, for the above-described premises.

Dated this 12th day of JUNE, 2001.

[affix corporate seal here]

ATTEST:

(SEAL)
(Signature of secretary of corporation)

LAWRENCE HARMON - DBA
HARMON'S MOTOR SERVICE
(Name of sole ownership, corporation, or partnership)

Lawrence Harmon

(Signature of sole owner or of authorized representative of corporation or partnership)

State of Illinois, County of COOK } ss.

The affiant, LAWRENCE HARMON

being first duly sworn, on oath deposes and says that he is LAWRENCE HARMON

the claimant; that he has read the foregoing waiver of lien and knows the contents thereof; and that all the statements therein contained are true.



12th day of June, 2001.

Juanita L. Harmon
Notary Public

This document was prepared by LAWRENCE HARMON - 4542 52 W. CARROLL AVE
(Name and Address)

Mail to: _____
(Name and Address)

(City) (State) (Zip Code)

Or Recorder's Office Box No. _____

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