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ORIGINAL CONTRACTOR'S MECHANICS LIEN CLAIM

STATE OF ILLINOIS)) SS COUNTY OF Cook___)

Doc#: 1030549067 Fee: \$31.00 Eugene "Gene" Moore RHSP Fee: \$10.00

Cook County Recorder of Deeds
Date: 11/01/2010 01:51 PM Pg: 1 of 5

(above space for recorder's use)

WHEREFORE, The property Owner (identified below), owned the Subject Property (identified below) on the Date of Contract: 6/29/2010

WHERFORE, on or about the Date of Contract, the Lien Claimant (identified Below) made a contract with the Property Owner (or agent of same) to make the following Improvements to the Subject Property:

See Attached Invoice

Nature of agreement (check one): Verba Written;

WHEREFORE, the Lien Claimant's agreement was with:

Name: ProTech Water Damage

Contact Person: Diane Ratliff

Street Address: 2010 Touhy Ave Suite G

City, State, Zip:Elk Grove Village, IL 60007

who, on information and belief, was acting with authority of the Property Owner to make subcontracts for the improvement of the Subject Property;

1030549067 Page: 2 of 5

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1030549067 Page: 3 of 5

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WHEREFORE, the Lien Claimant performed work to the Subject Property on the Date of Last Substantial Work, which was 7/02/2010

WHEREFORE, the Lien Claimant: (select one)	
Fully performed its obligations under contract	11
Was excused from full performance for the fol	llowing reason(s):
WHIEDERSONE Alexander that himd Lian Claiman	<i>t•</i>
WHEREFORE, the contractor that hired Lien Claiman	
Agreed in the initial contract to pay:	\$ <u>2278.08</u>
Requested additional work amounting to:	\$ 100.00 filing fees
TOTAL CHARGE	
Is entitled to credits for payment amounting to:	\$
is entitled to credits to: payment amounting to.	ψ
Is entitled to additional credits amounting to:	\$
TOTAL CREDITS:	\$
Leaving due, unpaid, and owing to the Lien Clair	nant:
·// _*	I: \$ <u>2378.08</u>
NOW THEREFORE, The Lien Claimant hereby file	es notice and claim for lier
against the Subject Property and the improvements the	nercuron, further against the
monies due or to become due from the Property Ow improvements, and upon the materials provided, a	ner as a consequence of the
Property Owner, the Original Contractor and ar	nv Other Interest Holders
(identified below).	
	(C)
The "Subject Property" is the following:	
Street Address: 126 Park Ave	
City, State, Zip: River Forest, IL 60305	
PIN: 15-12-313-017-0000	
The legal description should be attached to this Lien as exl	hibit A.

UNIONFEICIAL COPY

Invoice



ELK GROVE VILLAGE, IL 60007

Date	Invoice #
7/6/2010	6325DR

Customer Name Haddad, Ron 126 Park Ave River Forest, IL 60305

Bill To Triple A Kerry Moffer 512-743-0248 630-320-7245 Fax

Item			 			
Item Description Description Description Description Oty Rate Amount			Policy#	Clai	m #	Rep
Em Service Call/CT3 CT3 Ext-CEMENT Extraction gray/black water, or contaminated water from outside source. Price per SQ. FT. Minimum charge \$198.42 or \$1.11 per SQ. FT. Extraction of cray/black water, or contaminated water from outside source. Price per SQ. FT. Minimum charge \$198.42 or \$1.12 per SQ. FT. Decontamination of Equipment Pressure Clean Sewage Pressure Clean Sewage Washdown/Scrub Washdown/Scrub Washdown/Scrub with bleach and/or antimicrobial on affected area. Furniture Remove and/or Replace Dehumidifier-2000 Dehumidifier-2000 Dehumidifier-2000 Dehumidifier-2000 Turbo Air Mover Turbo Air Mover Set-up/Take Down Equipment Title SQ. FT. Sextraction of cravelion and drying equipment after drying structure contaminated with gray/black water. Pressure clean sewage/remove liquid waste and treat with antimicrobial. Price per SQ. FT. Washdown/Scrub with bleach and/or antimicrobial on affected area. Furniture of office equipment. Price per four Dehumidifier-1 x 4 days x \$135.00/day Dehumidifier. 1 x 1 days x \$135.00/day 1 1 35.00 135.00 135.00 135.00 14 28.00 1124.00 124.00	000		HOM014838146	IL548	3222	SCHMI
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			Tatal	<u> </u>		\$2.279.09

\$2,278.08 **Total** Payments/Credits \$-300.00 **Balance Due** \$1,978.08

Phone #	Fax #	E-mail	Web Site
847-437-3838	847-437-3939	ptwaterdamage@aol.com	www.protechwaterdamage.com

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The "Lien Claimant" is the following:

Name:	ProTech Water Damage, Inc.
Contact Person:	Diane Ratliff
Street Address:	2010 Touhy Ave. Suite G
City, State, Zip:	Elk Grove Village, Il 60008
The "Property Ow	ner" is the following:
Name: <u>Ronald Had</u>	lad
Contact Person:	
Street Address. 126	Park Ave
City, State, Zip: Rr	/er Forest, IL 60305
The "Other Intere	st Holders" are the following:
	<u> </u>
STATE OF ILLINOIS))SS
COUNTY OF Cook)) 55
The undersigned A	ffiant, first being duly sworn upor oath deposes and says that (s)he n on behalf of the Lien Claimant; that (s)he has read the foregoing
Claim Lien, that (s	the knows the contents thereof, and all the statements therein
contained are true.	111 4
Date: 1-1-1C	Name of person signing:
	Title with Company: Acct. Mg/
	Name of Company (if different)
Subscribed and swelln	to before me this date: 11/1/10
Notary Public	Official Seal Janetta R Wright Notary Public State of Illinois My Commission Expires 07/27/2014
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~

MAIL TO/ PREPARED BY: ProTech Water Damage 2010 Touhy Ave

Elk Grove Village, IL 60007