



Morris County Clerk's Office

Discharge of Construction Lien Claim

Ann F. Grossi, Esq., County Clerk
Administration and Records Building
P.O. Box 315, 10 Court Street
Morristown, NJ 07963-0335
973-285-6130 | morriscountyclerk.org

To the Recording Officer, County of _____

1. The Claimant, whose name is _____
and whose address is _____

filed a Construction Lien Claim against the below stated real property (called the "Property") owned by _____
for the value of work, services, materials or equipment provided in accordance with a contract
between the Claimant and _____.

2. The Property is described as Block _____, Lot _____, on the
Tax Map of _____, County of _____, State of New
Jersey.

3. The lien claim was filed on _____ as No. _____
in Book _____ at Page _____.

4. A Notice of Unpaid Balance and Right to File Lien (if any) was filed as No. _____
in Book _____ at Page _____.

5. Amendments to the original claim were recorded in Book _____ at Page _____.

6. **DISCHARGE.** I hereby request and authorize the Construction Lien to be Discharged.

Date: _____

Signed: _____

Name/Title: _____

On Behalf of: _____

Note: This form must be signed by the Claimant or the Attorney for the Claimant.

Acknowledgments (Complete Applicable One)

State of New Jersey, County of _____ SS:.

I certify that on _____, _____ personally came before me who stated to my satisfaction that this person (or if more than one, each person):

- a. Was the maker of the attached instrument; and,
- b. Executed this instrument as his or her own act.

Signed: _____

Print Name: _____

State of New Jersey, County of _____ SS:.

I certify that on _____, _____ personally came before me who stated to my satisfaction that this person (or if more than one, each person):

- a. Was the maker of the attached instrument;
- b. Was authorized to and did execute this instrument as _____ of _____, the entity named in this instrument; and
- c. Executed this instrument as the act of the entity.

Signed: _____

Print Name: _____

Record and return to:

Name: _____

Address: _____