

**NOTICE OF LIEN UNDER THE CONDOMINIUM ACT
UNPAID COMMON CHARGES**

To the (Register) (Clerk) of the County of _____, (City and) State of New York and to all having interest in said Unit described below:

PLEASE TAKE NOTICE, that the Board of Managers of _____ Condominium, with an office at _____ on behalf of all unit owners, as Lienor, has and claims a lien on and against the Condominium Unit hereinafter described:

The name and address of the property is:

The Condominium Declaration is dated _____, and was recorded on _____ in (Liber _____, page _____) (CRFN No. _____) (Control No. _____).

The record owner of the Condominium Unit is _____.

The Unit No. is _____ and is designated by tax block _____, lot no. _____.

The amount of the lien is \$ _____, ("Amount") for the following:

Date	Amount	Reason
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The claim of the lien is said Amount together with interest thereon.

Dated: _____,

LIENOR:

The Board of Managers of
Condominium

By: _____

VERIFICATION

, being duly sworn, deposes and says:

I am fully familiar with the facts and circumstances of this matter and have read the foregoing Notice of Lien and know the contents thereof, that the same is true to my knowledge, except as to matters stated therein upon information and belief and as to those matters, I believe them to be true.

The reason why this verification is made by the undersigned is that the undersigned is _____ .

Sworn to before me this
Day of _____ , _____ .

Notary Public

ACKNOWLEDGEMENT TAKEN IN NEW YORK STATE

State of New York, County of _____, ss:

On the _____ day of _____ in the year _____, before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

ACKNOWLEDGEMENT BY SUBSCRIBING WITNESS TAKEN IN NEW YORK STATE

State of New York, County of _____, ss:

On the _____ day of _____ in the year _____, before me, the undersigned, a Notary Public in and for said State, personally appeared _____, the subscribing witness to the foregoing instrument, with whom I am personally acquainted, who, being by me duly sworn, did depose and say that he/she/they reside(s) in

(if the place of residence is in a city, include the street and street number if any, thereof); that he/she/they know(s)

to be the individual described in and who executed the foregoing instrument; that said subscribing witness was present and saw said

execute the same; and that said witness at the same time subscribed his/her/their name(s) as a witness thereto

Title No.

TO

DISTRIBUTED BY
ABSOLUTE TITLE AGENCY, LLC
PH: 718-975-2175 FAX: 718-975-3225

ACKNOWLEDGEMENT TAKEN IN NEW YORK STATE

State of New York, County of _____, ss:

On the _____ day of _____ in the year _____, before me, the undersigned, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

ACKNOWLEDGEMENT TAKEN OUTSIDE NEW YORK STATE

*State of _____, County of _____, ss:

*(Or insert District of Columbia, Territory, Possession or Foreign County)

On the _____ day of _____ in the year _____, before me, the undersigned personally appeared

Personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), that by his/her/their signature(s) on the instrument, the individual(s) or the person upon behalf of which the individual(s) acted, executed the instrument, and that such individual make such appearance before the undersigned in the

(add the city or political subdivision and the state or country or other place the acknowledgement was taken).

SECTION:

BLOCK:

LOT:

COUNTY OR TOWN:

RETURN BY MAIL TO:

[Empty box for return by mail address]