Discharge of Construction Lien Claim

TO THE RECORDING OFFICER, COUNTY OF	F, STATE 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	nt provided in accordance with a contract between the Claimant and
2. The Property is described on the tax map of the Township of Egg Harbor, Cour	nty of Atlantic, State of New Jersey.
3. The lien claim was filed on as No	in Book, Page
4. A Notice of Unpaid Balance and Right to File Lie	en (if any) was filed as No in Book, Page
5. Amendments to the original claim were recorded in	in Book, 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, Cla	imant's successor in interest, or the Attorney for the Claimant.
	GMENTS (COMPLETE APPLICABLE ONE)
STATE OF, COUNTY OF _	
I CERTIFY that on, 20,	
satisfaction that this person (or if more thane one, each (a) was the maker of this instrument; and (b) executed this instrument as his or her own as	
	Print name and title below signature
STATE OF, COUNTY OF I CERTIFY that on, 20,	SS:
	personally came before me and stated to my satisfaction
that this person (or if more than one, each person): (a) was the maker of this instrument, (b) was authorized to and did execute this instruentity named in this instrument; and (c) executed this instrument as the act of the entity named in this instrument as the act of the entity named in this instrument.	tity.
RECORD AND RETURN TO:	Print name and title below signature

(For Recorder's Use Only)