

BORROWER'S RELEASE AND REQUEST FOR PAYMENT

This section to be completed by homeowner

I, _____ as owner of the property located at _____
(Please print your name) (Property address)

hereby authorize NFC Cedar Rapids (NFC CR) to disburse funds to _____ in the amount of \$ _____ for partial/final payment
(Contractor/payee) (\$ Amount must be filled in)
of work, labor, services and/or furnished materials described as follows:

(List all items completed)

And hereby agree to hold NFC Cedar Rapids harmless and hereby release NFC CR from any and all claims that I may have against NFC CR arising from or relating in any way to the payment I have hereby authorized.

(Borrower's Signature)

(Date)

(Daytime Telephone #)

WAIVER OF MECHANIC'S LIEN

Waiver to be completed by contractor/payee when check picked up

STATE OF IOWA, COUNTY OF LINN

The undersigned has been employed by the aforesaid homeowner to furnish labor, services and/or materials for construction, repair, and/or improvements to the aforesaid property. That said Company or person, has received payment as set above, and has been paid by the NFC Cedar Rapids (NFC CR) at the request of said homeowner (or the homeowner paid company or person directly and NFC CR is reimbursing the homeowner).

For good and for valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the undersigned does hereby waive and release any and all liens and rights to file and establish a mechanic's lien against the above building and improvements, and the above described premises, for labor or materials, or both, furnished by the undersigned through the date of this waiver.

The undersigned represents that no other person or party has any right to a lien on the above property on account of work performed or materials furnished to the undersigned by virtue of a contract or purchase order with the homeowner.

Check is PARTIAL/FINAL Executed and Check # _____ Received this date: _____ at Cedar Rapids, IA
(Circle one) (Date)

(Name of Company/Contractor/Homeowner picking up the Check)

(Signature)

Contractors need to complete:

(Please print name and Title)

(Tax ID# or SS#)

(Address)

(Telephone number)

Office Use Only:

Approving Inspector: _____ Date: _____ Okay to Pay