

Land Titles Registry

**CLAIM FOR LIEN** – *The Builder’s Liens Act* **Form 27.1**

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| 1. **CLAIMANT(S)** *(full legal name and address)* |
| 2. **ASSIGNMENT** *(complete this box only if the lien has been assigned)*  as assignee of    *(name address of assignor)* |
| 3. **CLAIM**    **The claimant claims a lien under *The Builders’ Liens Act* in the undermentioned land** |
| 4. **NAME AND ADDRESS OF OWNER(S) OF LAND** upon which this lien is claimed  This lien is claimed upon the estate of: |
| 5. **DESCRIPTION OF WORK DONE / SERVICES PROVIDED / MATERIALS SUPPLIED**  This lien is in respect of the following (work done / services provided / materials supplied), that is to say:  see schedule |
| 6. **NAME AND ADDRESS OF PERSON** for whom and upon whose credit (the work was done / the services  were provided / the materials were supplied)  Thework was (is to be) done / the services were (are to be) provided / the materials were (are to be) suplied for |
| on or before the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ . |
| 7. **AMOUNT CLAIMED**  The amount claimed as due (or to become due) is the sum of $ |
| 8. **LAND DESCRIPTION**  The following is a description of the land to be charged:  see schedule |
| AFFECTED TITLE NO. (S)**.** |
| 9. **CREDIT** *(when credit has been given, complete the following)*  The said work was done (or is to be done) (or services were or are to be provided or materials were or are to be supplied) on credit and the period of credit expired (or will expire) on the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ . |
| 10. **ADDRESS FOR SERVICE**  The address of the claimant for the purpose of service is**:** |
| 11. **SIGNATURE OF CLAIMANT**  **Dated at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in the Province of Manitoba, this \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_ .**        **name of claimant signature of claimant** |
| 12. **IMPORTANT NOTICES**  Any person who registers a claim for lien for an amount grossly in excess of the amount due to him or which he expects to become due to him or where he knows or ought to know that he does not have a lien is liable to any person who suffers damage as a result unless he satisfies the court that the registration of the claim for lien was made, and the amount for which the lien was claimed was calculated, in good faith and without negligence.  SINGULAR INCLUDES PLURAL AND VICE VERSA WHERE APPLICABLE. In this document “I” or “me” is to be read as including all applicants whether individual or corporate. |
| 13. **INSTRUMENT PRESENTED FOR REGISTRATION BY** *(include address, postal code, contact person and phone number)* |
| 14. AFFIDAVIT VERIFYING CLAIM I,   of the                            *(city/town, etc.)* of                                           in the                                       *(province/state, etc.)* of                                                            named (or agent of the Lien Claimant named) in the annexed claim for lien,        MAKE OATH AND SAY/HEREBY AFFIRM that I believe the facts set forth in the annexed claim for lien are true.  SWORN/AFFIRMED before me at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_.        signature  A Commissioner for Oaths in and for the  Province of Manitoba  My Commission expires:  A Notary Public in and for the Province of Manitoba    WE,   of the                              *(city/town, etc.)* of                                                in the                                       *(province/state, etc.)* of  AND   of the                              *(city/town, etc.)* of                                                in the                                       *(province/state, etc.)* of  named in the annexed claim for lien,  SEVERALLY MAKE OATH AND SAY/HEREBY AFFIRM that I believe the facts set forth in the annexed claim for lien are true insofar as they relate to me.              signature  SWORN/AFFIRMED before me at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ this \_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_\_\_.    signature    A Commissioner for Oaths in and for the  Province of Manitoba  My Commission expires:  A Notary Public in and for the Province of Manitoba |