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| Lienholder<br>Address  |
| claims a Lien under the Builders' Lien Act in the fee simple estate OR (specify if some other type of estate or interest applies) _____<br>Name<br>Address   |
| In the following land:   |
| The Lien is claimed in respect of the following work or materials:   |
| which work or materials were or are to be provided for:<br>Name of Person or Corporation:<br>Address   |
| <input type="checkbox"/> This lien is in respect of an improvement to an oil or gas well, or to an oil or gas well site, for which the lien may be registered in the Land Titles Office not later than 90 days from the last day that the work was completed or the materials were last furnished. |
| <div><input type="checkbox"/> a) The work was completed or the materials were last furnished:<br/><br/>on _____<br/><br/>- OR -<br/><input type="checkbox"/> b) The work is <u>not</u> yet completed or all the materials have <u>not</u> yet been furnished.</div>                                |
| The sum claimed as due or to become due is     \$ _____  |
| The address for service of the Lienholder in the Province of Alberta is  |

this     day of \_\_\_\_\_ , \_\_\_\_\_  
at \_\_\_\_\_ , Alberta.

(Signature of Lienholder or Agent)

I, \_\_\_\_\_, \_\_\_\_\_,  
of \_\_\_\_\_, Alberta  
named in the above (or annexed) statement make oath and say that the said claim is  
true.

Sworn before me at \_\_\_\_\_, Alberta  
on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
\_\_\_\_\_  
(Signature of Applicant)  
\_\_\_\_\_  
(Print or Stamp Name of Commissioner) (Expiry Date of Commission or Office)

- OR -

I, \_\_\_\_\_, \_\_\_\_\_,  
of \_\_\_\_\_, Alberta  
make oath and say:  
1 That I am the agent (or assignee) of  
.  
  
named in the above (or annexed) statement and have full knowledge of the facts set forth in  
the above (or annexed) statement.  
- OR -  
I am informed by \_\_\_\_\_  
and believe that the facts are as set forth in the above (or annexed) statement.  
2 That the said claim is true (or when deponent has been informed, that I believe  
.  
that the said claim is true).

Sworn before me at \_\_\_\_\_, Alberta  
on the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.  
\_\_\_\_\_  
(Signature of Applicant)  
\_\_\_\_\_  
(Print or Stamp Name of Commissioner) (Expiry Date of Commission or Office)