|  |  |
| --- | --- |
| DOTLOGO2 | **Sub-Subcontractor’s** **Lien and Bond Claim** |

|  |
| --- |
|       |
| Date |

Omer Osman, P.E.

Secretary

Department of Transportation

2300 South Dirksen Parkway, Room 300

Springfield, IL 62764

NOTICE OF LIEN AND BOND CLAIM

770 ILCS 60/23(c)

and 30 ILCS 550/1 & 550/2

|  |  |
| --- | --- |
| YOU ARE HEREBY NOTIFIED that  |       |
| was employed by  |       |
| a subcontractor to |       |
| the prime contractor, to provide construction supplies/services at the location of |
|       |
| under Contract # |      ; | by reason thereof there is due the undersigned sum of |
|       | Dollars |
| ($     ). | The undersigned claims a lien on the money, bonds or warrants due or to |
| become due from the Illinois Department of Transportation to |      , |
| a subcontractor to |      , |
| for the amount of its claim aforesaid, according to Statutes in such case made and provided and claims recovery under the contractor’s bond. |
| Company: |       |
| Address: |       |
|  |       |
|  |
| Telephone: |       |
| Email: |       |
|  |
| By: |  |
| (Name and Title) |
|  |
| STATE OF ILLINOIS |
| COUNTY OF  |       |  |
|  |
| Subscribed and sworn to before me this |  | day of | , | . |
|  |
|  |
|  |
| Notary Public |
|  |

cc: Prime Contractor

 Subcontractor

 Bonding Company

CERTIFIED MAIL - RETURN RECEIPT REQUESTED TO ADDRESSEE ONLY