|  |  |
| --- | --- |
| DOTLOGO2 | **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 | | | |  | | | | | | | | | | | |
| 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 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

Bonding Company

CERTIFIED MAIL - RETURN RECEIPT REQUESTED TO ADDRESSEE ONLY