

# ABSOLUTE NOTICE INC.

Toll Free Phone (888) NTO-LIEN (888-686-5436) | Toll Free Fax: (866) 719-9937

## NOTICE TO OWNER REQUEST FORM

Please fill in as completely as possible

About Your Company		
Company Name:		Phone:
Contact Person:		Fax:
Street Address:		
City:	State:	Zip:
Email:		
I prefer to receive copies of my documents and receipts via:		Email      Fax
About The Job (the physical location you performed the work)		
Project / Job Name:		
Physical Address:		
City:	State:	Zip:
County:		
Work Performed:		
Start Date:	End Date (if known):	
Notice of Commencement Doc #:		
Permit#:	Folio/Parcel #:	
Who Was Your Direct Contract With		
Individual or Company Name:		
Mailing Address:		
City:	State:	Zip:
Are they the:	Owner	General Contractor      Subcontractor
Who Was The General Contractor On The Job? (write same as above if applicable)		
Individual or Company Name:		
Mailing Address:		
City:	State:	Zip:
Please Use The Space Below For Any Additional Information or Parties You Would Like Notices Sent To (you may attached additional sheets if needed):		

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## NTO REQUEST – continued

Preparation Options <small>initial in the space next to your selection</small>	Service Option <small>initial in the space next to your selection</small>
<b>Standard - \$45.00 3 business days</b>	<b>Standard – Reg. &amp; Cert. Mail</b>
<b>Next Business Day - \$55.00</b>	<b>Express Mail - \$20.00 per recipient</b>
<b>Same Day - \$65.00</b>	<b>FedEx Next Day - \$30.00 per recipient</b>
<b>Who Referred You?</b>	<b>How Did You Hear About Us?</b>

By signing below and submitting this form, you are hereby requesting Absolute Notice Inc to act as an authorized agent on your behalf to prepare and attempt to serve a Notice to Owner based on the information provided above and the information obtained using the information provided above. By submitting this request, you agree to the terms as listed on the most recently posted Customer Service Agreement displayed on [www.AbsoluteNotice.com/terms.htm](http://www.AbsoluteNotice.com/terms.htm). In addition to those terms you specifically agree to the following:

1. You agree to waive all claims against Absolute Notice Inc for damages and/or loss which may be caused by an act of negligence, mistakes and/or inadvertence committed by Absolute Notice Inc , it's officers, or employees for damages and/or loss in the connection with preparing and forwarding of Notice to Owner(s) on your behalf. You further assume the risk of all acts associated with the filing, recording, and/or service of the requested Notice to Owner, and waive any and all rights and remedies at law or in equity it may have for breach of this agreement with Absolute Notice Inc.
2. You agree that you and/or your company, has provided the services/materials described in this request under the "Type of Work Performed" section, that you and/or your company provided these services/materials at the specific job site address listed on this request, and that your and/or your company is still owed money for the services/materials your provided at the specified address.
3. It is understood that in the event no Notice of Commencement has been filed, the Notice to Owner will be prepared based solely on the information provided by customer. Any liability, which might arise from this request, will be limited to the cost of the Notice to Owner, not to exceed \$100.00. Absolute Notice Inc is not responsible for wrong addresses, typos, lost/misdirected/delayed mail.

**FURTHERMORE YOU RECOGNIZE THAT ABSOLUTE NOTICE INC, AND ITS OFFICERS AND/OR EMPLOYEES ARE NOT ENGAGED IN RENDERING LEGAL ADVICE OR PROVIDING LEGAL SERVICES. IF YOU HAVE ANY QUESTIONS OR CONCERNS YOU SHOULD SEEK THE SERVICES OF A QUALIFIED LEGAL PROFESSIONAL BEFORE SUBMITTING YOUR REQUEST. BY SUBMITTING YOUR REQUEST YOU ACKNOWLEDGE THAT YOU HAVE HAD THE RIGHT AND OPPORTUNITY TO CONSULT WITH A QUALIFIED LEGAL PROFESSIONAL, AND THAT A FAILURE TO DO SO IS NOT THE RESPONSIBILITY OF ABSOLUTE NOTICE INC.**

<b>Signature</b>	<b>Date</b>

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## CREDIT CARD AUTHORIZATION

By filling out this form, and faxing to the number listed below, you authorize Absolute Notice Inc to use the following credit card information as payment for the amount listed below.

**NOTE IF YOU ELECT TO PAY USING AMERICAN EXPRESS THERE WILL BE A \$5.00 SURCHARGE ADDED TO YOUR RECEIPT TO COVER THE COST OF SENDING YOU YOUR COPIES OF ALL DOCUMENTS VIA CERTIFIED MAIL WITH RETURN RECEIPT. THIS IS A REQUIREMENT OF AMERICAN EXPRESS TO MAINTAIN OUR STATUS AS A MERCHANT. WE APOLOGIZE FOR ANY INCONVENIENCE**

<b>Credit Card Type:</b>	
<b>Credit Card Number:</b>	
<b>Credit Card Expiration Date:</b>	
<b>Credit Card Security Code (3 digits on back of card for Visa/MC, 4 digits on front for AMEX):</b>	
<b>Full Name on Card:</b>	
<b>Project Name:</b>	
<b>Amount Authorized:</b>	
<b>Signature</b>	<b>Date</b>

**FAX YOUR COMPLETED REQUEST TO OUR TOLL FREE FAX AT (866) 719-9937**  
**You may send multiple NTO request forms in with one payment authorization.**