



PAUL D. PATE
Secretary of State
State of Iowa

MECHANIC'S NOTICE AND LIEN REGISTRY

SUBMITTER INFORMATION

Submitter information: Name, Address, City, State, Postal Code

MNLR Number (if applicable): _____
(May be found by searching the MNLR database at <https://sos.iowa.gov/mnlr/search>)

Email address: _____

Telephone: _____

- * **Print or type information. Illegible or incomplete documents will be refused and returned.**
- * **All fields on Submitter Information form are required and must be returned with documents.**

SECRETARY OF STATE
Business Services Division
Lucas Building, 1st Floor
Des Moines, IA 50319

Phone: (515) 281-5204
Fax: (515) 242-5953
Website: sos.iowa.gov



Affidavit for Release of Mechanic's Lien Bond

Releasing Party Information:

Name: _____

Mailing Address: _____

City: _____ State: _____ Postal Code: _____

I, _____, on this ____ day of _____, 20____,
(Name of releasing party) (Date)

release the bond for MNLN number _____ filed with the administrator on
(MNLN #)

_____, for the following reason(s):
(Filing date)

- Mechanic's lien has been satisfied.
- Mechanic's lien has been forfeited pursuant to 572.28.

I, the undersigned, hereby affirm that I have the legal authority to release the
aforementioned bond in accordance with Iowa law. Further, I agree to incur any and all
liability and discharge the Iowa Secretary of State's Office from any liability that may
arise as a result of fraudulent or erroneous release of bond.

Signature: _____

Date: _____