



Contractor's Conditional Waiver of Lien

This is a required form. Your contractor will need to complete this form and confirm that they will waive any claims of lien once full payment for labor and materials has been received. If you are working with multiple contractors, each contractor will need to fill out a separate form.

Member(s) Name: _____

Mortgage Number: _____

Property Address: _____

Contractor's Agreement

Conditional upon payment of \$_____, all claim(s) of lien for labor and/or materials will be waived.

(Please note this amount will need to match the Signed Contract amount provided by this contractor)

I, the contractor completing repairs to the above mentioned property, agree that I am duly licensed under applicable laws and regulations. I also acknowledge that all liens be waived upon full payment received as noted above. I will comply with applicable codes and regulations overseeing residential repair or reconstruction, and will be repairing damage at the property listed above as reported in the insurance adjuster's worksheet unless specifically noted.

Contractor/Company signature: _____ Title: _____

Contractor/Company name (please print): _____

Contractor/Company phone number: _____ Date: _____

Return to:

Regular Mail:

Overnight Mail:

myCUMortgage
Attn: Escrow Dept.
PO Box 341344
Beavercreek, OH 45431

myCUMortgage
Attn: Escrow Dept.
3560 Pentagon Blvd, Suite 301
Beavercreek, OH 45434

Phone Number: 877-912-8006

Fax number: 937-912-8796