DOUGLAS COUNTY, NV

11/02/2016 02:12 PM

2016-890008

Rec:\$15.00

Total:\$15.00

Pgs=2

R M ROOFING COMPANY

KAREN ELLISON, RECORDER

APN: 1220-21-1/1-065
Recording requested by and mail documents and tax statements, if applicable, to:

Name: RM ROUFING COMPANY

Address: P.O. BOX 2846 City/State/Zip: MINDEN, NV 89423

LIN101

Nevada Legal Forms & Tax Services www.nevadalegalforms.com

NOTICE OF LIEN

(Mechanic Lien)

NOTICE IS F	HEREBY	GIVEN:
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1.	That RM ROOFING COMPANY
	hereinafter known as "Claimant", hereby claims a lien, pursuant to the provisions of N.R.S.,
	108.221 to 108.246 inclusive, on property located in DOUGLAS
	County, Nevada. (Set forth legal description and commonly known address, if known)
	1222 W. COTTAGE. LOOP LOT # 36
	GARDNERVILLE RANCHOS
	HERITAGE NV SENIOR
	HOUSING LOT 36 BLOCK

2.	The amount of the original contract is: $\sqrt{2/\alpha}$.
3.	The total amount of all additional or changed work, materials and equipment, if any, is:
4.	The total amount of all payments as a just do data in the
4.	The total amount of all payments received to date is: \$
5.	The amount of the lien, after deducting all just credits and offsets is: \$ 72/2.50
6.	The name of the owner(s), if known, of the property is/are:
	GARDNERVILLE LLC
7.	The name of the person by whom the lien claimant was employed or to whom the lien
N	claimant furnished or agreed to furnish work, materials or equipment is: FRED
The same of	
The state of the s	MUSER, MANAGER, SpOSTON CHAPMERVILLE / LC
Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Ow	MUSSER, MANAGER, DOOSTON GAPDNERVILLE LLC DARREL LEAMON

	8.	A brief statement of the terms of payment of the lien claimant's contract:
		RECIEVED BY THE 1St OF THE MONTH WILL BE PAID ON
ı		THE 15 th OF SAME MONTH, INVAICES RECIEVED BY
1		THE 15th OF THE MONTH TO BEPAID BY 1STOR NEXT MONTH
!	9.	That the claim herein is entitled to a reasonable attorney's fee, statutory interest on the amount of this lien claim and costs incurred in perfecting this lien claim.
	10.	THIS FORM COMPLIES WITH NRS 108.226.
	In Witne	ess Whereof, I/We have hereunto set my hand/our hands this 2 day of NOV
		Print name of Claimant
		By:Authorized Signature
		OF NEVADA,
	COUNT	ROBERT MENZEY , being first duly sworn
	on oath a	according to law, deposes and says:
		have read the foregoing Notice of Lien claim, know the contents thereof and state that the
		rue of my own personal knowledge, except those matters stated upon information and belief,
	and, as t	o those matters, I believe them to be true.
ď		Authorized Signature of Claimant
į	Subscrib	ed and sworn to before me the day of November, 20/6
	Notary P	NOTARY PUBLIC STATE OF NEVADA County of Douglas and State of Notary Public State of Nevada County of State of Nevada County of State of Nevada New Appointment State of New

Consult an attorney if you doubt this forms fitness for your purpose.