

HOME ACCESSIBILITY AND REPAIR PROGRAM (HARP)  
**CONTRACTOR CERTIFICATE AND RELEASE OF LIENS**

Agency (CAA): \_\_\_\_\_ Technician Name: \_\_\_\_\_  
\_\_\_\_\_ Technician Phone: \_\_\_\_\_  
\_\_\_\_\_ Technician Email: \_\_\_\_\_

<b>Applicant:</b> _____	<b>Co-Applicant:</b> _____
<b>Property:</b> _____ _____	<b>Contractor:</b> _____ <b>Contract Amount:</b> <b>\$</b> _____ <b>Contract Date:</b> _____

Regarding the *Construction Contract* entered into between the Applicant and Contractor identified above, for work performed on the above-referenced Property in accordance with the agreed upon project specifications, the Contractor certifies/states as follows:

1. There is due from and payable by the Applicant to the Contractor, the amount of \$\_\_\_\_\_ pursuant to the *Construction Contract* and duly approved *Change Orders*.
2. All work invoiced under the Construction Contract has been performed in accordance with the terms thereof, and that there are no unpaid claims for materials, supplies or equipment and no claims of laborers or mechanics for unpaid wages arising out of the performance of the Construction Contract.
3. That upon receipt of the payment stated in Paragraph 1 hereof, the Contractor does hereby release the Applicant from any and all claims arising under or by virtue of this invoiced amount; provided, however, that if for any reason the Applicant does not pay in full the amount stated in Paragraph 1 hereof, the unpaid amount will become the amount which the Contractor has not released.

\_\_\_\_\_  
Contractor Representative Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contractor Representative Name