## Maine State Housing Authority (MaineHousing) WEATHERIZATION ASSISTANCE PROGRAM (WAP) CENTRAL HEATING IMPROVEMENT PROGRAM (CHIP)

## **RELEASE OF LIENS**

PRIMARY APPLICANT:		OWNER (if different than Applicant):
First N	ame MI Last Name	First Name MI Last Name
PHYSICAL ADDRESS (Property):		CONTRACTOR:
Street		Contractor Name
City	State Zip	COMMUNITY ACTION AGENCY (CAA):
Work Order Date:		CAA Name
1. 2.	There is due from and payable by the CAA to the Contractor, the amount of \$	
3.	The undersigned releases any and all claims, other than for the final payment set forth above, arising under or by virtue of the Work Order and agrees to indemnify the CAA, MaineHousing and the property owner against any such claims.	
4.	4. The undersigned has provided directly to the Applicant or attached to this Release all manufacturers' and suppliers' written guarantees and warranties covering materials and equipment furnished under the Work Order.	
Contra	ctor Representative Signature	Date
Contractor Representative Name		