| **Project Information** | |
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| **GLO’s Designated Representative (“GDR”) Name:** | **GLO Contract Number:** |
| **Applicant Name and Address (“Property”):** | **Project #:** |
| **Project Type (Rehabilitation, Reconstruction, etc.):** | |

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| **Contractor Information** | | | | | |
| **Contractor Name and Address (“Contractor”):** | | | | **Contractor Contract Number (if applicable):** | |
| **Contractor Requested Amount: $** | | | | | |
| On receipt by the Contractor Authorized Representative of this document, payment from the General Land Office (“GLO”) in the requested amount (listed above) will be made, payable to the aforementioned Contractor; subsequently, when the payment has been paid by the bank on which it is drawn, this document becomes effective to release any mechanic’s lien right, any right arising from a payment bond that complies with a state or federal statute, any common law payment bond right, any claim for payment, and any rights under any similar ordinance, rule, or statute related to claim or payment rights for persons in the Contractor Authorized Representative’s position that the Contractor Authorized Representative has on the Property to the extent outlined in the GLO Contract.  This release covers the final payment to the Contractor Authorized Representative for all labor, services, equipment, or materials furnished to the Property or to the GLO.  Before any recipient of this document relies on this document, the recipient should verify evidence of payment to the Contractor Authorized Representative.  The Contractor Authorized Representative warrants that the Contractor Authorized Representative has already paid or will use the funds received from this final payment to promptly pay in full all of the Contractor Authorized Representative’s laborers, subcontractors, materialmen, and suppliers for all work materials, equipment, or services provided for or to the above-referenced Property up to the date of this waiver and release. Payments that are still due and payable by the Contractor to laborers, subcontractors, materialmen, and suppliers are as follows: | | | | | |
| **Name of Payee** | **Address and Telephone Number, if known** | | **Amount Owed** | | **Anticipated Payment Date** |
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| Other than the above-specified bills owed to the referenced persons, the Contractor is not aware of any unpaid bills, claims, demands, or causes of action by any of its subcontractors, laborers, suppliers, or materialmen for or in connection with the furnishing of labor or materials, or both, for the construction, renovation, or repair of improvements located on or related to the Property.  Contractor further understands that this Affidavit is being given pursuant to and in accordance with Sections 53.085 and 53.259 of the Texas Property Code and that the intentional, knowing, or reckless making of a false or misleading statement in this Affidavit constitutes an offense under said Section and is a misdemeanor.  Contractor hereby indemnifies the General Land Office (“GLO”), its officers, employees, and designees, and the State of Texas from and against any loss or expense resulting from false or incorrect information within this Affidavit.  **Warning: Any person who knowingly makes a false claim or statement to HUD may be subject to civil or criminal penalties under 18 U.S.C. 287, 1001 and 31 U.S.C. 3729.** | | | | | |
| **Certification of Contractor** | | | | | |
| **Printed Name of Contractor:** | | | | | |
| **Name of Contractor Authorized Representative:** | | | | **Title:** | |
| **Signature of Contractor Authorized Representative:** | | | | **Date:** | |
| **Notary’s Acknowledgment** | | | | | |
| **State of Texas**  **County of**  Before me, a notary public, on this day personally appeared ,known to me to be the person whose name is subscribed to the foregoing document and, being by me first duly sworn, declared that the statements therein contained are true and correct. | | | | | |
| **Signature of Notary** | | **NOTARY SEAL** | | | |
| **Notary Public State of Texas – Printed Name** | |
| **Date Notary’s Commission Expires** | |