AFFIDAVIT OF PAYMENT AND RELEASE OF LIENS

To: Peters Township Sanitary Authority
111 Bell Drive
McMurray, PA 15317

Re: _____
Development

We hereby certify that, to the best of my knowledge, all outstanding claims and indebtedness of any nature resulting from the performance of _____ _____Construction Agreement with Peters Township Sanitary Authority for the _____ residential land development plan, dated _____, 20___, have been fully paid.

We hereby deliver to Peters Township Sanitary Authority a complete release of all liens arising out of said Agreement for unpaid material and labor, or other costs.

_____
Print Name/Title

_____ _____
Signature Date

COMMONWEALTH OF PENNSYLVANIA)
) SS:
COUNTY OF WASHINGTON)

On this _____ day of _____, 20_____, before me, a Notary Public in and for said County and Commonwealth, personally appeared, F. Daniel Caste, who being duly sworn according to law, deposes and says the facts set forth in the foregoing Affidavit and Release are true and correct to the best of his knowledge, information and belief.

IN WITNESS WHEREOF, I hereunto set my hand and official seal.

_____

Notary Public

My Comm. Exp: