



**NOTICE TO CONTRACTOR**

5655 Lake Acworth Dr. NW, Suite 310  
Acworth, GA 30120

770-926-2790  
FAX 770-926-2512

Check box for service(s) requested

**Notice to Contractor  
Fee \$110.00**

**General Contractor** \_\_\_\_\_

Address \_\_\_\_\_ Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Company you contracted with** \_\_\_\_\_

Address \_\_\_\_\_ Suite # \_\_\_\_\_ Permit # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Project Name** \_\_\_\_\_

Address \_\_\_\_\_ Suite # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Contract Price \$** \_\_\_\_\_ **First Date of Service** \_\_\_\_\_

or anticipated value of labor and materials

must be within 30 days

**Materials, Labor or Service provided** \_\_\_\_\_

(briefly describe)

Your Company Name \_\_\_\_\_ Contact \_\_\_\_\_

Phone \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

I have requested that Lien Filers, Etc. of Heath W. Williams, LLC as my agent, send a Notice to Contractor on the above described property. I understand that Lien Filers, Etc. of Heath W. Williams, LLC will rely on information supplied by me. I authorize payment for the work requested with this order.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_