

RECORDING REQUESTED BY
AND WHEN RECORDED MAIL TO:
HD SUPPLY FACILITIES MAINTENANCE, LTD.
101 RIVERVIEW PARKWAY
SANTEE, CA 92071

SENT TO:
JUDGE OF PROBATE RECORDER
PO BOX 825
COLUMBIANA AL 35051

Document prepared by: Gloria Siordia
Address: 101 Riverview Parkway, Santee CA 92071
(800) 798-8888 Ext. 67129

CUST# 14730481



20170629000231820 1/2 \$18.00
Shelby Cnty Judge of Probate, AL
06/29/2017 07:56:50 AM FILED/CERT

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MECHANIC'S LIEN
(CLAIM OF LIEN)

The undersigned, **HD SUPPLY FACILITIES MAINTENANCE, LTD.**, whose address is **101 RIVERVIEW PARKWAY, SANTEE, CA 92071**, referred to in this Claim of Lien as the Claimant, claims a mechanic's lien for the labor, services, equipment and/or materials described below, furnished for a work of improvement upon the certain real property located in the County of **SHELBY** State of **AL** and described as follows: **HOLIDAY INN EXPRESS/ALABASTER 1000 BALMORAL DRIVE, ALABASTER, AL 35007**

LEGAL: SUBDIVISION NAME: BALMORAL PHASE 2 RES, PRIMARY LOT: 5A, MAP BOOK: 38, MAP PAGE: 15, LOT DIMENSION 1:0, LOT DIMENSION 2:0, ACRES: 1.38, LOT 5-A ACCORDING TO THE FINAL PLAT BALMORAL PHASE II RESURVERY NO. 1 AS RECORDED IN MAP BOOK 38, PAGE 15, IN THE PROBATE OFFICE OF SHELBY COUNTY, ALABAMA / PARCEL # 23 1 01 4 001 001.022

After deducting all just credits and offsets, the sum of **\$29,468.53** together with interest thereon at the rate of **18** percent per annum from **DECMEBER 1, 2016** due Claimant for the following labor, services, equipment and/or materials furnished by Claimant: **MISCELLANEOUS HARDWARE, ELECTRICAL AND PLUMBING SUPPLIES PURCHASED BUT NOT PAID FOR.**

The name(s) of the person(s) or company (ies) by whom Claimant was employed, or to whom Claimant furnished the labor, services, equipment and/or materials is/are:

HOLIDAY INN EXPRESS/ALABASTER 1000 BALMORAL DRIVE, ALABASTER, AL 35007

The name(s) and address(s) of the owner(s) or reputed owner(s) of the real property is/are:

SHRI SHAYONA LLC 1949 VILLAGE DRIVE, LEEDS AL 35094

The first day of providing labor/materials was: **NOVEMBER 1, 2016**

The last day of providing labor/materials was: **MARCH 2, 2017**

Name of Claimant: **HD SUPPLY FACILITIES MAINTENANCE, LTD.**

By: _____

LAURA NALWALKER, AREA CREDIT MANAGER

I, the undersigned, declare: I am the **AREA CREDIT MANAGER** of **HD SUPPLY FACILITIES MAINTENANCE, LTD.**, the Claimant named in the foregoing claim of mechanic's lien; I am authorized to make this verification for the Claimant; I have read the foregoing claim of mechanic's lien and know the contents thereof, and the same is true of my own knowledge.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

June 26, 2017

LAURA NALWALKER, AREA CREDIT MANAGER
HD SUPPLY FACILITIES MAINTENANCE, LTD.

CALIFORNIA ALL PURPOSE ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of **CALIFORNIA**
County of **SAN DIEGO**

On 06/26/2017 before me, NICKIE L FANNIN Notary Public, personally appeared LAURA NALWALKER, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that ~~he~~/she executed the same in ~~his~~/her authorized capacity, and that by ~~his~~/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.



I certify under the PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal

Nickie L. Fannin
SIGNATURE OF THE NOTARY

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