

NOTICE OF INTENT TO STOP WORK

(Send this form by certified mail, return receipt requested.)

(Name of owner)
(Address)

Dear _____:

A payment from you of \$_____ due on _____ according to the terms of our contract with you has been demanded, but has not yet been received.

We have performed according to the terms of our contract. If payment is not received within _____ days, we cannot continue to work and will stop work on the construction.

If the payment is not made within a reasonable time after work stoppage, the contract will be treated as terminated, and we may seek damages for breach of contract.

If we are forced to stop work, even though we may then resume work after your payment, the work stoppage may have the effect of extending the contract completion date and may increase the job cost.

By _____
(The person filling out the form should sign here.)

Title _____

Company _____

Date _____

cc: *(Name of Financing Agent)*