

Return this form to the following office:
Code Enforcement & Hearings Bureau, 1340 Poydras Street, 21st Floor, New Orleans, LA70112

SHERIFF SALE
Sale Date _____
STATE PROGRAM
Reference
Number _____
Attach Documentation

**CITY OF NEW ORLEANS
LIEN WAIVER CLAIM FORM**
PLEASE TYPE OR PRINT

**Received
(Office and Date)**

NAME OF OWNER

DATE PROPERTY WAS ACQUIRED BY CLAIMANT

PROPERTY ADDRESS

CITY AND STATE
NEW ORLEANS, LA

ZIP

TAX BILL NUMBER

CONTACT INFORMATION
ADDRESS

TELEPHONE NUMBER(S)

LIEN TO BE

- CANCELLED
 SUBORDINATED
 REFUNDED

THE CLAIMANT BELIEVES THAT THIS CLAIM SHOULD BE ALLOWED FOR THE FOLLOWING REASON: (TYPE OR PRINT)

Use Reverse Side if Space is Insufficient. Please Attach Any Supporting Documents (recent tax bill, pictures of property, etc.)

Under the penalties of perjury, to the best of my knowledge and belief, the claim that I have stated here (including any accompanying schedules and statements) is true and correct.

Signed: _____

Print Name: _____

Dated: _____

Title: _____

If the claim is granted, the claimant will be responsible for canceling or subordinating the liens of record with the Recorder of Mortgages and will be responsible for the costs, including any attorney's fees, of canceling or subordinating the liens of record with the Recorder of Mortgages.

FOR OFFICE USE ONLY

Recommendation of office that assessed the lien(s):

Signed: _____

Print Name: _____

Dated: _____

Title: _____

TAX RESEARCH MUST BE ATTACHED TO FORM PRIOR TO ADMINISTRATIVE REVIEW.

ACTION TAKEN BY ADMINISTRATIVE REVIEW:
 APPROVED DENIED

APPROVED BUREAU: _____

APPROVED LAW: _____

APPROVED CAO: _____

**FINAL APPROVAL
CITY ATTORNEY:** _____

**FINAL APPROVAL
DIRECTOR OF FINANCE:** _____

**FINAL APPROVAL
CAO:** _____



City of New Orleans
Code Enforcement and Hearings Bureau

**Application for Administrative Review
of Lien Waiver Requests**

Please direct correspondence to:

CODE ENFORCEMENT & HEARINGS BUREAU
1340 Poydras Street
Suite 2100
New Orleans, LA 70112

Phone inquiries should be directed to:
(504)658-4346

Applications discussed by appointments only

CRITERIA: Properties **MUST** be fully renovated, in the process of being renovated, demolished or For Sale.

CHECKLIST: Application **MUST** include the following documents to be processed:

- _____ Completed Lien Waiver Application;
- _____ Photos: Minimum of four (4) full views -front, back, left and right side-include the front and rear yard.
All photos must be labeled and secured to the application;
- _____ Copy of Tax Bill;
- _____ Permit(s); if complete, Certificate of Occupancy;

If applicable:

- _____ Documentation evidencing participation in a State program, including but not limited to the following programs: Road Home Homeowner Program, Hazard Mitigation Grant Proceeds, Small Rental Property Program, and Blight Reduction Grant Adjustment Program;

For corporations or applications completed by anyone other than the named owner, submit the following:

- _____ Document giving the authority to execute documents on behalf of owner, i.e. Power of Attorney, Letters of Administration, Board Resolution, etc.

This application will be reviewed within 30 days. After review, all applicants will be informed of the results by mail at the address in "Contact Information".

You may also visit the Code Enforcement page at:
www.nola.gov/RESIDENTS/Code-Enforcement

If all supporting documents are not attached, the application will NOT be processed.