



MARYLAND DEPARTMENT OF NATURAL RESOURCES  
LICENSING AND REGISTRATION SERVICE

**MECHANICS LIEN – INVOICE AFFIDAVIT**

VESSEL Identification Number EX: MD 1234 AB / USCG # 123456	Manufacturer	Length	Year
		ft.    in.	

**LIENOR**

\_\_\_\_\_  
Name Phone Number

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

**CUSTOMER**

\_\_\_\_\_  
First Middle                      Last

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

Date Services Rendered \_\_\_\_\_ to \_\_\_\_\_

Description of Services \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Charges for services and/or materials provided                      \$ \_\_\_\_\_

Total Finance Charges / Interest    \$ \_\_\_\_\_

Total charges    =                      \$ \_\_\_\_\_

I declare and affirm under penalty of perjury that the facts in this Invoice Affidavit are true and correct

\_\_\_\_\_  
Date

\_\_\_\_\_  
Lienor's Signature

\_\_\_\_\_  
Printed Name of Lienor