



SECRETARY OF THE STATE OF CONNECTICUT

MAILING ADDRESS: COMMERCIAL RECORDING DIVISION, CONNECTICUT SECRETARY OF THE STATE, P.O. BOX 150470, HARTFORD, CT 06115-0470

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JUDGMENT LIEN CERTIFICATE

USE INK. COMPLETE ALL SECTIONS. PRINT OR TYPE. ATTACH 8 1/2 X 11 SHEETS IF NECESSARY.

FILING PARTY (CONFIRMATION WILL BE SENT TO THIS ADDRESS): CUSTOMER ID: NAME: ADDRESS: CITY: STATE: ZIP:				FILING FEE: \$50 MAKE CHECKS PAYABLE TO "SECRETARY OF STATE"	
1. JUDGMENT DEBTORS FULL LEGAL NAME					
OR	1A. ORGANIZATION'S NAME				
	1B. INDIVIDUAL'S				
	LAST NAME	FIRST NAME	MIDDLE	SUFFIX	
1C. MAILING ADDRESS: ADDRESS: CITY: STATE: ZIP: COUNTRY:					
2. ADDITIONAL JUDGMENT DEBTORS FULL LEGAL NAME					
OR	2A. ORGANIZATION'S NAME				
	2B. INDIVIDUAL'S				
	LAST NAME	FIRST NAME	MIDDLE	SUFFIX	
2C. MAILING ADDRESS: ADDRESS: CITY: STATE: ZIP: COUNTRY:					

3. JUDGMENT CREDITORS FULL LEGAL NAME				
OR	3A. ORGANIZATION'S NAME			
	3B. INDIVIDUAL'S			
	LAST NAME	FIRST NAME	MIDDLE	SUFFIX
3C. MAILING ADDRESS:				
ADDRESS:				
CITY:				
STATE:		ZIP:	COUNTRY:	
4. ADDITIONAL JUDGMENT CREDITORS FULL LEGAL NAME				
OR	4A. ORGANIZATION'S NAME			
	4B. INDIVIDUAL'S			
	LAST NAME	FIRST NAME	MIDDLE	SUFFIX
4C. MAILING ADDRESS:				
ADDRESS:				
CITY:				
STATE:		ZIP:	COUNTRY:	
5. COURT IN WHICH JUDGMENT WAS RENDERED				
6. DATE OF JUDGMENT				
7. ORIGINAL JUDGMENT AMOUNT			8. AMOUNT DUE	
9. PERSONAL PROPERTY ON WHICH LIEN IS PLACED				
10. JUDGMENT CREDITOR SIGNATURE:			11. DATE:	