

State of New Hampshire

Department of State, UCC Division

Form 9 - Notice of Other Lien Filing

Name and telephone number of filer or contact (optional)	For Secretary of State Use Only
Return copy to: (name and mailing address)	
Check one only: <input type="checkbox"/> Notice of filing of lien <input type="checkbox"/> Notice of full release or discharge of lien <input type="checkbox"/> Notice of change of lien	

1. Debtor Name: Insert only one debtor in 1a or 1b.

1a. Business Name	1c. Mailing Address
OR	
1b. Individual's Last Name First M.I. Suffix	City State Country Postal Code

2. Additional Debtor Name: Insert only one debtor in 2a or 2b.

2a. Business Name	2c. Mailing Address
OR	
2b. Individual's Last Name First M.I. Suffix	City State Country Postal Code

3. Lienor's Name: Insert only one lienor in 3a or 3b.

3a. Business Name	3c. Mailing Address
OR	
3b. Individual's Last Name First M.I. Suffix	City State Country Postal Code

4. Type of lien/statutory authority (check one only):

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Federal Tax lien | <input type="checkbox"/> State Tax lien | <input type="checkbox"/> Aircraft Registration lien | <input type="checkbox"/> Employment Security lien |
| <input type="checkbox"/> Child Support lien | <input type="checkbox"/> Hazardous Waste lien | <input type="checkbox"/> Housing Finance Auth. lien | <input type="checkbox"/> Department of Labor lien |
| <input type="checkbox"/> Road Toll lien | <input type="checkbox"/> Writ of Attachment | <input type="checkbox"/> State Food Security Act lien | |

5. Complete if filing is a release, discharge or change.

Filing Location of initial lien: _____

Filing Date of initial lien: _____

File Number assigned to initial lien: _____

Form 9 Addendum

1. Additional Debtor Name: Insert only one debtor in 1a or 1b.

1a. Business Name

OR

1b. Individual's Last Name **First** **M.I.** **Suffix**

1c. Mailing Address

City **State** **Country** **Postal Code**

2. Additional Debtor Name: Insert only one debtor in 2a or 2b.

2a. Business Name

OR

2b. Individual's Last Name **First** **M.I.** **Suffix**

2c. Mailing Address

City **State** **Country** **Postal Code**

3. Additional Debtor's Name: Insert only one debtor in 3a or 3b.

3a. Business Name

OR

3b. Individual's Last Name **First** **M.I.** **Suffix**

3c. Mailing Address

City **State** **Country** **Postal Code**

4. Additional Lienor's Name: Insert only one lienor in 4a or 4b.

4a. Business Name

OR

4b. Individual's Last Name **First** **M.I.** **Suffix**

4c. Mailing Address

City **State** **Country** **Postal Code**

Use the space below for additional information.