Certification Form - No Listing of Secured Party Instructions

This Certification Form – No Listing of Secured Party should be submitted to the Register of Deeds of the County where a contested document was filed if the contested lien, encumbrance or other document filed does not contain the name or address of the filing party, plaintiff, complainant, lienor, or owner of the lien. This form should be filed with the County Register of Deeds – Uncontested Lien Affidavit form.

A blank Certification Form - No Listing of Secured Party may be obtained by going to sos.tn.gov and entering the form name in the search bar; or, by requesting the Certification Form - No Listing of Secured Party from the Secretary of State by emailing TNSOS.CORPINFO@tn.gov; or, by calling (615) 741-2286. In addition, a blank Certification Form - No Listing of Secured Party may be obtained in person at the Office of the Secretary of State located at 312 Rosa L. Parks Ave, FL3, Nashville, TN 37243.

The Certification Form - No Listing of Secured Party should be typed or hand printed in ink. Instructions for completing the affidavit are below.

A completed Certification Form - No Listing of Secured Party may be submitted for filing either by mail to by hand delivery to the County Register of Deeds in the county in which a fraudulent lien, encumbrance or any other document was filed.

Fill in the Certification Form - No Listing of Secured Party Form very carefully; mistakes may have important legal consequences. If you have questions, consult your attorney. The Office of the Secretary of State cannot give legal advice.

Completing the Certification Form - No Listing of Secured Party

Public Official

Name: Enter the full legal name of the affiant. Include first name, middle initial and last name.

Mailing Address: Enter the full mailing address of the affiant. Include the street address, city, state and zip code.

Phone Number: Enter a phone number where the affiant can be reached. Include the area code.

Email Address: Enter an electronic mail address used by the affiant, if available.

Contested Document

Type of Document: Enter the type of document filed with the County Register of Deeds which is contested. This may be a lien, other encumbrance, or any other type of document that reasonably constitutes a cloud on the title of a real property interest.

Office the Document Was Filed In: Enter the name of the Office in which the contested document was filed. For example, this may be the "Davidson County Register of Deeds".

Book and Page Number of the Document: Enter the book and page number of the document as filed with the county register of deeds. This information can be provided to you by the County Register of Deeds office in which the document was filed.

Check the Box: This box must be checked to file this document with the Register of Deeds. I certify under penalty of perjury that the name and address of the filing party, plaintiff, complainant, lienor or owner of the lien was not available.

Signatures

The Public Official MUST sign the Certification Form before a Notary Public. The Notary Public must sign the Certification Form, indicate the date of the notarization, list their commission expiration date and affix their notary seal to the form. Failure to notarize the Certification Form will result in the form being rejected.

Filing Fee

There is no filing fee required.

CERTIFICATION FORM - NO LISTING OF SECURED PARTY For Office Use Only This document must be filed in the County Register of Deeds office where the lien was filed. Please see the instructions to complete and submit this form. No filing fee required PUBLIC OFFICIAL First:_____ MI:____ Last:____ Mailing Address: City:______ ST:_____ Zip:_____ CONTESTED DOCUMENT Type of document: Office document was filed in: Book and Page number of the document: ______ ☐ I certify under penalty of perjury that the name and address of the filing party, plaintiff, complainant, lienor or owner of the lien was not available. SIGNATURES Signature Date Affiant's (Public Official) Signature Notary Signature My Commission expires: Sworn to and subscribed before me this _____ day of _____ , 20 ____