

10-DAY STOP WORK ORDER**(Private Work Only)**
(California Civil Code Section 3260.2)**To:** _____
(Name of Owner)_____
(Address)_____
(City, State and Zip)**Project:** _____
(Name)_____
(Address)_____
(City, State and Zip)**PLEASE TAKE NOTICE THAT** _____
(Name of Original Contractor Intending to Stop Work)whose address is _____
(Address of Person or Firm Intending to Stop Work)

is owed monies pursuant to a written contract with the aforementioned Owner and has not been paid for at least 35 days since payment was due under the Contract. Claimant is not aware of any dispute as to the satisfactory performance of its work on the private work of improvement described as follows:

(Name and Location of the Project Where Work and/or Materials Were Furnished)Unless all amounts due and payable to Claimant are paid by Owner within **ten (10) days** of the date of this notice, Claimant will stop all further work on this project. The sum that is due and payable to Claimant and which must be paid to avoid any stoppage of work is:\$ _____
(Amount Due and Payable by Owner)A copy of this notice is being served upon all subcontractors with whom Claimant has a direct contractual relationship on the Project contemporaneously with this notice to Owner. Within **five (5) days** of its receipt of this notice, Owner is required to forward this notice to any construction lender.

Upon payment of the above amount or other resolution of this dispute or cancellation of the work stoppage, Claimant shall post a Notice of Cancellation in a conspicuous location at the job site and at the main office, and shall serve a copy of such Notice upon all subcontractors with whom Claimant has a direct contractual relationship.

PLEASE TAKE NOTICE THAT Claimant and its surety, if any, or subcontractors and their respective sureties, if any, shall not be liable for any delays or damages that the owner or a subcontractor may suffer as a result of serving this notice or any subsequent work stoppage for non-payment pursuant to this notice. Further, subject to limited exceptions, the liability of Claimant or any of Claimant's subcontractors to any material supplier or subcontractor for a cessation of work under this notice shall be limited to the amount of monetary damages recoverable by the material supplier or subcontractor through the 10-day notice period associated with this notice and not beyond.**CLAIMANT:** _____

(Name of Claimant)**Dated:** _____**By:** _____
(Owner or Agent of Claimant Must Sign Here)**PROOF OF SERVICE**I am employed in the County of _____ I am over the age of 18 years.
(Name of County)My business address is _____
(Address)On _____, I served the 10-Day Stop Work Order on the interested parties by certified mail,
(Date)
postage prepaid, addressed to the persons or interested parties set forth in the attached service list.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on _____, at _____, California.
(Date) (City)_____
(Signature of Declarant)