STATUTORY LIEN / NOTICE AMENDMENT: ASL-4

NORTH DAKOTA SECRETARY OF STATE/COUNTY RECORDERS

SFN 17760 (7-2011)

Type or print legibly. Carefully follow instructions on page 2.

1a. Contact Name: (optional)	Telephone Number:
1b. Send Acknowledgment to: (Name and Address)	

THE ABOVE SPACE IS RESERVED FOR FILING OFFICE USE ONLY

2. File Number on Initial Statutory Lien/Notice Filing:
(One file number per form)

3. Requested Change: **(NOTE: Except for termination, a separate fee is required for each action checked.)**

☐ **TERMINATION** Lienholder (secured party) no longer claims a security interest under the Statutory Lien/Notice bearing the file number in section 2. **(Lienholder (Secured Party) signature required in section 7.)**

☐ **AMENDMENT** The Statutory Lien/Notice bearing the file number in section 2 is being amended as described in sections 4, 5 and 6. **(Lienholder (Secured Party) signature required in section 7.)**

Changes to the debtor information are limited to correcting the spelling of the debtor's name, correcting the debtor's SSN/TIN number, or correcting or changing the debtor's address.

Changes to the lienholder (secured party) information are limited to correcting the spelling of the lienholder's (secured party's) name, or correcting or changing the lienholder's (secured party's) address.

☐ **ASSIGNMENT** The lienholder (secured party's) named in section 5 assigns to the assignee whose name, address and SSN/TIN number (optional) are provided in section 6, all rights under the Statutory Lien/Notice bearing the file number listed in section 2. **(Lienholder (Secured Party) signature required in section 7.)**

4. Amendment (Party Information): This Amendment affects (Check only one box.)

☐ **Debtor** or

☐ **Lienholder (secured party)** of record.

5. Current Record Information:

	5a. Organization's Name			
OR	5b. Individual's Last Name	First Name	Middle Name	Suffix

6. Changed or New Information/Assignee Information: Provide only **one** name of organization or individual (6a or 6b) and a complete mailing address.

	6a. Organization's Name				
OR	6b. Individual's Last Name	First Name	Middle Name	Suffix	
6c. SSN/TIN *	6d. Mailing Address	City	State	Postal Code	

7. Signature:

Lienholder's (secured party's) signature / Date

By / Title

STATUTORY LIEN/NOTICE AMENDMENT: ASL-4 INSTRUCTIONS

FEES: <u>All fees must be paid prior to filing with the Secretary of State.</u>

$10 … ASL-4 (Amendment or Assignment)	$15 … Non-standard Filing(other than prescribed form or 8 ½ x 11)
$ 0 … ASL-4 (Termination - no fee)	$ 1 … Per additional attached page (8 ½ x 11)

FILING OFFICE: Submit the original document to the filing office where the initial Statutory Lien/Notice was filed.

ACCURACY: Before filing, carefully review for accuracy. The statement must be filed as presented to the filing office.

ADDENDUMS: If the space provided on the form is inadequate, attach an additional page.

ACKNOWLEDGMENT COPY: An acknowledgment will be sent to the filer at the address provided in section 1b.

The following instructions relate to the numbered sections of this form.

1. **CONTACT ADDRESS FOR ACKNOWLEDGMENT:**
   a. To assist the filing office that may need to contact the filer, provide the name and phone number of the filer. (optional)
   b. Provide the mailing address where the filing office will send the acknowledgment copy after filing.

2. **FILE NUMBER ON INITIAL STATUTORY LIEN/NOTICE:** Provide the file number on the initial ASL-1, ASL-2, ASL-3 or ASL-5 filing to which this amendment relates. This number is required to make the requested change indicated in sections 3, 4, 5, and 6 to the initial Statutory Lien/Notice.

3. **REQUESTED CHANGE:** Mark the box or boxes indicating the type of amendment to the initial Statutory Lien/Notice number indicated in section 2. If more than one amendment type is requested, a separate fee is required for each change. Each change will be treated like a separate filing and a separate file number will be assigned. If the initial Statutory Lien/Notice number in section 2 was filed as a Lien/Notice filing, any amendment to the debtor or lienholder (secured party) will affect both the Lien and Notice portions of the filing. A termination automatically terminates both Lien and Notice portions of that filing.

   AMENDMENT: Information changes are limited to:

   Regarding the debtor:
   - Amending the spelling of the debtor's name,
   - Correcting the SSN/TIN number, or
   - Amending the debtor's address.

   Regarding the Lienholder (secured party):
   - Amending the spelling of the lienholder's(secured party) name, or
   - Amending the lienholder's(secured party's) address.

   ASSIGNMENT: Assignment results in transfer of entire security interest.

4. **AMENDMENT (party information):** Mark only **<u>one</u>** box to indicate if the change affects the debtor or lienholder (secured party).

5. **CURRENT RECORD INFORMATION:** If the requested change is an assignment or amendment, list the current record information of the affected debtor or lienholder (secured party).

6. **CHANGED OR NEW INFORMATION/ ASSIGNEE INFORMATION:** If the requested change is an assignment, complete the assignee name and address. If the requested change is an amendment, complete the debtor or lienholder (secured party) information that this amendment will affect.

   * Section 1324 of the Food Security Act of 1985 (*Pub. L. 99198, 99 Stat. 1535, 7 U.S.C. 1631)* requires the social security number of the debtor or, in the case of a debtor doing business other than as an individual, the Internal Revenue Service taxpayer identification number. Failure to provide the social security number or the taxpayer identification number will cause rejection of the filing. To enable farm product buyers a practical method for discovering the existence of a security interest of any farm product, this number is published from the Central Indexing Database to a CD as a search element of the data, but the number is not displayed on the data report, nor is the number reflected on copies of any statements filed in the Central Indexing System.

7. **SIGNATURE:** The lienholder (secured party) must sign in number 7. If the lienholder (secured party) is an organization, complete the second line with the signor's title or status in the organization.