

Form 3 Version 1
Subcontractors' Charges Act 1974
NOTICE TO SECURITY HOLDER OF CLAIM OF CHARGE BEING GIVEN¹

TO:

Name of person other than the employer or superior contractor who holds a security for the Contract (in this form called <i>Security Holder</i>):	Address of Security Holder:

FROM:

Name of Claimant (in this form called <i>Claimant</i>)	Address of Claimant:

The Claimant hereby gives notice that a claim of charge, in accordance with section 10 of the *Subcontractors' Charges Act 1974*, has been made on money² that is now or will be payable by the Employer to the Contractor under the Contract.

The claim of charge is for the Amount Claimed and concerning Particulars of Claim for work done by the Claimant in respect of the Contract, which work was done by the Claimant under a subcontract with the Claimant's Contractor between the dates set out in this Notice.

The Notice of Claim of Charge requires the Employer to take the necessary steps to see that the Amount Claimed is paid or secured to the Claimant.

The Security Holder may have obligations to retain the security for the Contract or a subcontract in accordance with Section 11A (Use of security for benefit of subcontractor if no contractor acceptance of liability for all claims) or Section 11B (Use of security for benefit of subcontractor if contractor acceptance of liability for all claims) of the *Subcontractors' Charges Act 1974*.

Name of employer or superior contractor <i>by</i> whom money is payable (in this form called <i>Employer</i>)	Address of Employer

¹ This notice is to be given only if a person other than the employer or superior contractor holds a security for the contract.

² *Money* includes retention money. If retention money only is sought to be charged use Form 3A

Name of Claimant's contractor or a superior contractor <i>to whom money is payable by the Employer (in this form called Contractor)</i>	Address of Contractor

Name of contractor <i>by whom money is payable to the Claimant under a subcontract (in this form called Claimant's Contractor)</i>	Address of Claimant's Contractor

Contract: (Identify contract between Employer and Contractor)	Address where Claimant's work was done

Amount Claimed:

Particulars of Claim: (Give particulars of work done by Claimant)

Dates between which the work was carried out:

Name of person who has certified the claim (Qualified Person):	Qualifications of Qualified Person

Dated at

this day of

<input type="text"/>	<input type="text"/>
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Signature of Claimant or officer of Claimant where Claimant is a corporation *Signature of Witness*