

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

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99 OCT 28 AM 9:44

MORRIS W. CARTER  
RECORDER

**SWORN STATEMENT AND NOTICE OF INTENTION TO  
HOLD ASSESSMENT LIEN**

OWNER: Mr. Peter Panos  
8750 Harrison Avenue, #310  
Munster, IN 46321

CLAIMANT: Harrison Heights Condominium Owners' Assoc., Inc.  
C/O Premier Properties, Inc.  
8232 Kennedy Avenue  
Highland, IN 46322

The undersigned, being first duly sworn, state that:

1. The above-named owner is in default upon the October, 1998 thru October, 1999, assessment for the Common Expenses of the Condominium.

2. The Harrison Heights Condominium Owners' Assoc., Inc., intends to hold a lien for payment of the assessment against the property commonly known as 8750 Harrison Street, #310, Munster, IN 46322-2306 and legally described as follows: 8750 Harrison Street, #310, Lot One Petso's Subdivision, in the Town of Munster, as shown in Plat Book 41, Page 38 in Lake County, Indiana. Indicated in the Harrison Heights Declaration of Condominium recorded May 22, 1974, as Document No. 252280 and Amendment thereto recorded 10/13/93, as Document No. 92087298 in the Recorder's Office of Lake County, IN, together with an undivided 2.545527% interest in and to the Common and Limited Common Areas and facilities as described in the Declarations, which lien shall attach to both the apartment above-described and its appurtenances.

3. The amount claimed under this statement is Two thousand sixty four and 33/100 Dollars (\$2064.33), plus interest thereon at the prevailing statutory rate and the expenses of all proceedings to recover the assessment, including a reasonable attorney's fee.

4. The assessment was due within the last sixty days.



Harrison Heights Condominium  
Owners' Association, Inc.

By: Thomas Fleming  
Property Manager

BEFORE ME the undersigned, a Notary Public for County of Lake, State of Indiana, personally appeared Thomas Fleming who, being first duly sworn upon his oath, states that he is duly authorized by the Harrison Heights Condominium Owners' Assoc., Inc., to execute this instrument on its behalf, and further that the facts alleged herein are true. Signed and sealed this twenty-fifth day of October, 1999.

Charlene Wilson  
Charlene Wilson  
Notary Public

My Commission Expires: 11-8-01

My County of Residence: Lake

I hereby certify that I have this \_\_\_\_\_ day of \_\_\_\_\_, 1999, mailed a duplicate of this sworn statement and notice, by United States mail, first class, postage prepaid, to \_\_\_\_\_ at \_\_\_\_\_.

Recorder, Lake County, Indiana

BY: \_\_\_\_\_  
Deputy Recorder

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Su  
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