

100 N. GRIFFITH BOULEVARD • GRIFFITH, INDIANA 46319•2154

(219) 924-1999 • (219) 756-1999 • (708) 891-0900 • Fax (219) 924-2903

As we commence work on your home, I would like to take a moment of your time to explain how Indiana Mechanics lien law works.

When we begin construction on your home, the "Notice to Owners" is required by law in order for subcontractors, like Meyer's, to legally vest our interest. This procedure allows us to file a Mechanical Lien on the property we are performing work on in the event that we are not paid. THIS IS NOT A LIEN. It is nothing more than a Notice that if we are not part, we reserve the right to file a lien.

NOTICE TO OWNER

TO: CALVIN WILLIAMS 6726 S. CAMPBELL AVE. CHICAGO, IL 60629

You are hereby notified that the undersigned has been employed by your contractor BULAK INC.

to furnish labor and material upon your real estate commonly described as: PHASE 4 LOT 65 at an agreed contract price, not including any extras or options, which may arise during construction.

This notice is to advise you that the undersigned may hold you personally responsible

This notice is not to be considered as a reflection on the credit worthiness of your contractor, who is a valued customer of ours. This is a routine effort in accordance with Indiana Law to preserve our lien rights in the above project.

MEYER'S HEATING & COOLING, INC.

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

NO. 7005 1160 0004 6938 9700

Revised 6.03

HEATING . COOLING . PLUMBING • ELECTF Prescribed by the State Board of Accounts (2005)

County form 170

Declaration

Document is

This form is to be signed by the preparer of a document and recorded with each document in accordance with IC 36-2-7.5-5(a).

I, the undersigned preparer of the attached document, in accordance with IC 36-2-7.5, do herby affirm under the penalties of perjury:

- 1. I have reviewed the attached document for the purpose of identifying and, to the extent permitted by law, redacting all Social Security number in attached document.
- 2. I have redacted, to the extent permitted by law, each Social Security number in the attached document.

I, undersigned, affirm under the penalties of perjury, that the foregoing declarations are true.

Signature of Declarant

Printed Name of Declarant