STATE OF INDIANAL LAKE COUNTY FILED FOR RECORD

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MICHAEL A. BROWN RECCRIDER

MERRILLVILLE CONSERVANCY DISTRICT

6250 BROADWAY MERRILLVILLE IN 46410 PHONE 980-5220 FAX 980-8035

SWORN STATEMENT OF INTENTION TO HOLD LIEN

TO: JAMES WOODWORTH
6317 KENTUCKY ST
MERRILLVILLE IN 46410

STATE OF INDIANA, COUNTY OF LAKE.

KEY NUMBER: 1502100046 Document 18

ACCT. #: 1800252000

The undersigned, being first duly sworn makes this Sworn Statement of Intention to Hold Lien upon the property that is being described below and says that:

1.) The undersigned Sanitary District of Merrillville, Indiana, intends to hold a lien on land, commonly known as: 6317 KENTUCKY PL

and legally described as follows:

E.M ROGNES 2ND ADD TO GLENELLYN N 41FT N41 FT L.46 BL.1 S 39FT L.47 BL.1

as well as on all buildings or other structures and improvements located thereon or connected therewith for sewage services furnished by the undersigned.

2.)	THE AMOUNT CLAIMED DELINQUENT UNDER THIS STATEMENT IS	80.85
3.)	THE AMOUNT OF PENALTY CLAIMED IS	0.00
4.)	THE AMOUNT OF COST IS	39.00
5.)	THE TOTAL AMOUNT DUE IS	\$119.85

MERRILLVILLE CONSERVANCY DISTRICT 6250 BROADWAY MERRILLVILLE IN 46410 (219) 980-5220

> CK#10633 10634

County Form 170

Prescribed by the State Board of Accounts (2005)

Declaration

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 hereby affirm under the penalties of perjury:

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

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

