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STATE OF INDIAM LAKE COUNTY FILED FOR RECORD

2006 MAR -7 AM 11: 24

MICHAEL A. BROWN RECORDER

RETURN TO: EMCOR Hyre Electric Co. of Indiana 2655 Garfield Avenue Highland, IN 46322

## RELEASE OF MECHANIC'S LIEN

For valuable consideration, the receipt whereof is hereby acknowledged, a certain Mechanic's Lien existing in favor of EMCOR HYRE ELECTRIC CO. OF INDIANA, INC. and against BANK CALUMET TRUST #P-4567 the following real estate, to-wit:

Key #20-13-0661-0010 Saratoga Phase 3 Lot #46

Commonly known as: 1202 Saratoga Avenue, Schererville, Indiana

a written notice of an intention to hold, which lien was filed in the Office of the Recorder of Lake County, State of Indiana, and recorded as Document No. 2005 090994 in said county is hereby declared fully satisfied and released this 27<sup>th</sup> day of February , 2006.

This Document is the property of INDIANA, INC. the Lake County Recorder!

Nancee C. Tomassoni, Vice President

STATE OF INDIANA

) SS:

**COUNTY OF LAKE** 

Before me, a Notary Public, in and for said County and State, personally appeared Nancee C. Tomassoni, VP of EMCOR Hyre Electric Co. Of Indiana, Inc. and acknowledged the execution of the above and foregoing Release.

WITNESS my hand and Notarial Seal this 27th Day of February ,2006.

Melissa Kitchen, Notary Public

My Commission Expires: 04/10/2013

County of Residence: Lake

This instrument prepared by <u>Betsy Rossi</u>, a resident of <u>Lake</u> County, Indiana. EMCOR Job #13809

1202 515 R 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

Melissa Kitchen

Printed Name of Declarant