STATE OF INDIANA)	BOARD OF PUBLIC WORKS & SAFETY	
COUNTY OF LAKE)	WHITING, INDIANA 💫	
CITY OF WHITING BUILDING COMMISSIONER MICHAEL HRINYO	006 01	
Plaintiff,	196	
VS.) ORDER NO. BC-2006- 200	
DEMOLITION ORDER ISSUED	2005 A 46375 A 46375 A ATCHISON RING REGARDING BY BUILDING COMMISSIONER Ment is	SIAGE OF THUS LAKE COUNT FILED FOR REC
This matter having been set for hearing of the City of Whiting Board of Public Works	on the day of MARCH \$ 2006.	
 City appears by Building Common Owner disoldoes not appear in the second s	missioner Michael Hrinyo in person/with-counsel. ce of hearing as follows: ervice. 47 Archi/Son is owned by the Commissioner. ig Commissioner establishes that the based on the following: ructural condition that makes it unsafe operty; ublic health; erson or property because of a violation dinance concerning building condition	\$14 CA WHC
requirements of a	a statute or an ordinance.	LUA.
		$v\pi$

3: ...

6.	SPECIAL FINDINGS: DEMOLITION CONTRACTORS
	HAVE BEEN CONTACTED BY DWNERS
BASE	ED ON THE FINDINGS, THE BOARD NOW ORDERS AS FOLLOWS:
The c	Feb 21,206
1110	
	rescinded modified as follows:
	SO ORDERED THIS 6 DAY OF MARCH, 2006.
	Soft Mateuer
	Joseph M. Stahura, President CIAL!
	Rudy Wunder Membern is the property of
	the Lake County Recorder!
	Marty Jakubowski, Member.
	SEAL SEAL
	MOIANA THE

Prescribed by the State Board of Accounts (2005)

County form 170

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 herby affirm under the penalties of perjury: County Recorder with IC 36-2-7.5, do

- 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

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

Signature of Declarant

Printed Name of Declarant

LULUNA COMMISSIONER