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STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2006 024406

2006 MAR 24 AM 11:48

MICHAEL A. BROWN  
RECORDER

FOR A VALUABLE CONSIDERATION, THE RECEIPT WHEREOF IS HEREBY ACKNOWLEDGED, A CERTAIN SEWAGE LIEN EXISTING IN FAVOR OF THE GARY SANITARY DISTRICT, 3600 WEST THIRD AVENUE, GARY, INDIANA 46406, AND AGAINST MC PIPE, MACK & CHRISTINE, 1019 KENWOOD STREET, HAMMOND IN 46320

ON THE FOLLOWING REAL ESTATE TO-WIT:

AMOUNT: \$ 248.10

KEY NUMBER: 25-44-0301-0017

LEGAL DESCRIPTION: GARY LAND CO'S 11<sup>TH</sup> SUB. ALL L.17 BL.9

COMMON ADDRESS: 1148 HARRISON STREET

A WRITTEN NOTICE OF AN INTENTION TO HOLD LIEN WHICH IS TO BE FILED IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, STATE OF INDIANA.

SIGNED:

PREPARED BY:

TITLE:

*Gay M. Lowery*  
GAY M. LOWERY  
CUSTOMER SERVICE ACCOUNT COORDINATOR

DATE:

*February 21, 2006*

STATE OF INDIANA )

) SS:

COUNTY OF LAKE )

BEFORE ME THE UNDERSIGNED, A NOTARY PUBLIC FOR LAKE COUNTY, PERSONALLY APPEARED GAY M. LOWERY AND BEFORE ME ACKNOWLEDGED THE EXECUTION OF THIS INSTRUMENT THE 21<sup>st</sup> DAY OF February, 2006.

NOTARY SIGNATURE:

*Mary M. Brown*



\$ 11

CAW



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 hereby 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

GAY M. LOWERY

Printed Name of Declarant