STATE OF INDIAHA FILED FOR RECORD

2006 024409

2006 MAR 24 AM 11: 48

MICHAEL A BROWN RECORDING OF SEWER LIERCORDER

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 MILES, LEON W ET AL, 1140 JACKSON STREET, GARY, IN 46407

ON THE FOLLOWING REAL ESTATE TO-WIT:

AMOUNT:

\$ 288.50

KEY NUMBER:

25-44-0303-0011

LEGAL DESCRIPTION:

GARY LAND CO'S 11TH SUB. ALL L.14 BL.11

COMMON ADDRESS:

1140 JACKSON STREET IMENT IS

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 INDIA is the property of

SIGNED:

PREPARED BY:

TITLE:

M/LOWER

COORDINATOR STØMER SERVICE

DATE:

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 14 DAY OF

, **20**06.

NOTARY SIGNATURE:

MARY M. BROWN Lake County My Commission Expires February 20, 2011

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 herby affirm under the penalties of perjury; unty Recorder!

- 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