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MICHAEL A. CROWN
RECORDER

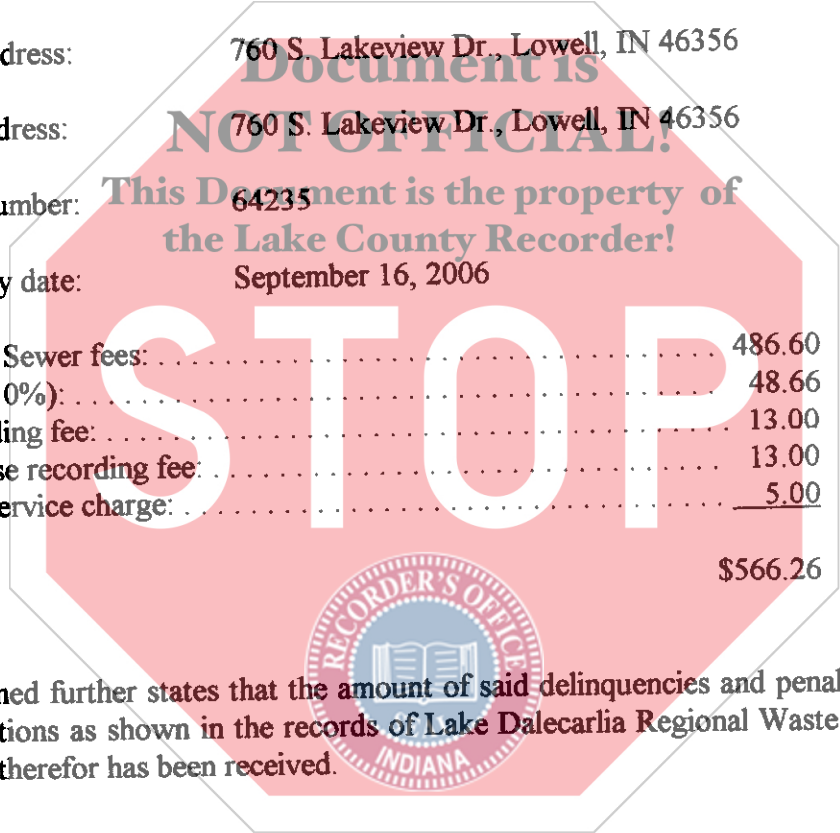
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NOTICE OF LIEN FOR DELINQUENT SEWER ACCOUNT

TO THE RECORDER OF LAKE COUNTY, INDIANA:

Pursuant to IC 36-9-23, the undersigned Office Manager of Lake Dalecarlia Regional Waste District, a municipal corporation formed and acting pursuant to IC 13-26, hereby submits its notice of intention to hold a lien for delinquent sewer fees and penalties on the following described real estate, in the itemized amount shown below, plus delinquencies accruing thereafter until this lien is released, to-wit:

| | |
|-----------------------------|---------------------------------------|
| Legal description: | DALECARLIA BLOCKS 39 TO 43 L.97 |
| Property Key Number: | 02-03-0175-0047 |
| Owner(s): | Hamm, John A & Kristina D |
| Property address: | 760 S. Lakeview Dr., Lowell, IN 46356 |
| Mailing Address: | 760 S. Lakeview Dr., Lowell, IN 46356 |
| Account Number: | 64235 |
| Delinquency date: | September 16, 2006 |
| Delinquent Sewer fees: | 486.60 |
| Penalties (10%): | 48.66 |
| Lien recording fee: | 13.00 |
| Lien Release recording fee: | 13.00 |
| Statutory service charge: | 5.00 |
| TOTAL: | \$566.26 |



The undersigned further states that the amount of said delinquencies and penalties so submitted are true and correct computations as shown in the records of Lake Dalecarlia Regional Waste District, Lowell, Indiana, and that no payment therefor has been received.

13-
EP

CL#9274

Nicole Walkowiak

Nicole Walkowiak, Office Manager
telephone: (219) 696-4035

STATE OF INDIANA)
COUNTY OF LAKE) SS:

Before me, a Notary Public in and for said County and State, personally appeared Nicole Walkowiak, who acknowledged the execution of the foregoing Notice of Lien for Delinquent Sewer Account, and who, having been duly sworn, under the penalties of perjury, stated that the facts and matters therein set forth are true and correct, this 18 day of September, 2006.

My Commission Expires: September 11, 2008
Resident of Lake County, Indiana Crest White, Notary Public

Pursuant to IC 36-2-11-15, I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law.

Signature: Nicole Walkowiak Date signed: 9/18/06
Printed: NICOLE WALKOWIAK

Return this document to:

Lake Dalecarlia Regional Waste District
15901 Briargate Place
Lowell, Indiana 46356

This instrument prepared by Timothy R. Sendak, Attorney at Law
209 South Main Street, Crown Point, Indiana 46307

