STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2008 043847

2009 JUN 16 PM 2:00

MICHAEL A. EROWN RECORDER

### AT&T INDIANA NON-EXCLUSIVE EASEMENT

CROSS REFERENCE TO: <u>Deed in Trust #91014033</u>

UNDERTAKING 6579935

EASEMENT **210380** 

R/W REQUEST NUMBER 00335412/52399

For a valuable consideration of one dollar (\$1.00), receipt of which is hereby acknowledged, the undersigned Beatrice Zeilenga Declaration of Trust (Grantor) hereby grants and conveys to Indiana Bell Telephone Company, Incorporated dba AT&T Indiana, an Indiana Corporation, and its affiliates and licensees, successors and assigns (collectively "Grantees") a non-exclusive easement in, under, over, upon and across the Easement Area (described below), for the purposes of and in order to construct, reconstruct, modify, supplement, maintain, operate and/or remove facilities for the transmission of signals used in the provision of communication, video and/or information services and/or any other services or uses for which such facilities may be used including, but not limited to, poles, guys, anchors, and messenger strand, equipment cabinets or enclosures and support posts or pads, cables, wires, pedestals or other above-ground cable or wire enclosures, marker posts and signs, and other related or useful equipment, fixtures, appurtenances and facilities, together with the right to have commercial electrical service extended across the Property (described below) and Easement Area to provide service to such facilities and the right of ingress and egress across the Property and the Easement Area for the purpose of access to and use of the easement granted

The Property is legally described as: The South 60 feet of Lot 20 in Kennedy Avenue Addition to Highland, as per plat thereof, recorded in Plat Book 25 page 28, in the Office of the Recorder of Lake County, Indiana.

The Easement Area is legally described as: From document #91014033; A part of Lot 20 in Kennedy Avenue Addition to Highland as recorded in Book 25 page 28 in the Office of the Recorder, Lake County, Indiana, described as follows: Commencing at the Southwest corner of Lot 20, said point also being the point of beginning; thence North 00 degrees 09 minutes 07 seconds West, on the West line of said Lot 20, 15.0 feet; thence North 89 degrees 54 minutes 47 seconds West and parallel with the South line of said Lot 20, 20.0 feet; thence South 00 degrees 09 minutes 07 seconds East and parallel with the West line of said Lot 20, 10.0 feet; thence North 89 degrees 54 minutes 47 seconds East and parallel with the South line of said lot 20, 143.71 feet to a point on the East line of said Lot 20; thence South 00 degrees 17 minutes 33 seconds East, 5.0 feet to the Southeast corner of said Lot 20; thence South 89 degrees 54 minutes 47 seconds West, 163.73 feet to the point of beginning, containing 1019 square feet, more or less, subject to easements and/or Right of Way record.

The Grantor represents and warrants to the Grantee that Grantor is the true and lawful owner of the Property and has full right and power to grant and convey the rights conveyed herein.

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PEGGY HOLINGA KATONA LAKE COUNTY AUDITOR 521 CKH24550 Grantee hereby agrees to restore all property disturbed by its activities in use of the easement to the condition existing prior to the disturbance.

Grantee shall have the right to remove or trim such trees and brush in the Easement Area as is necessary to exercise the rights conveyed herein.

The Grantor shall not construct improvements in the Easement Area or change the finish grade of the Easement Area without the consent of the Grantee.

This Easement is binding upon and shall inure to the benefit of the heirs, successors, assigns, and licensees of the parties hereto.

With our hands this 30 day of May, 2008, County, Indiana Tellinois Document is	at		
County, Indiana Iclinois Document is			
GRANTOR: Beatrice Zeilenga Declara			
This Document is the property.			
By: the Lake County By: A State OR	- Junekma		
	arickman - POA#		
State of Indiana Tecinois			
County of KANE			
Personally appeared before me, a Notary Public, in and for said County and State,			
this day of, 2008, 2008			
Who acknowledged the execution of the above easement.			
Polit McDoral	, Notary Public		
My commission expires 8-/-/0	Robert McDonald Notary Public, State of Illinois		
This document was drafted by:  Address of	( My Commission Exp. 00/01/2010 )		
AT&T Legal Department Right-of-Wa	AT&T Indiana Right-of-Way Department 420 7 <sup>th</sup> Street		

Chicago, IL 60606

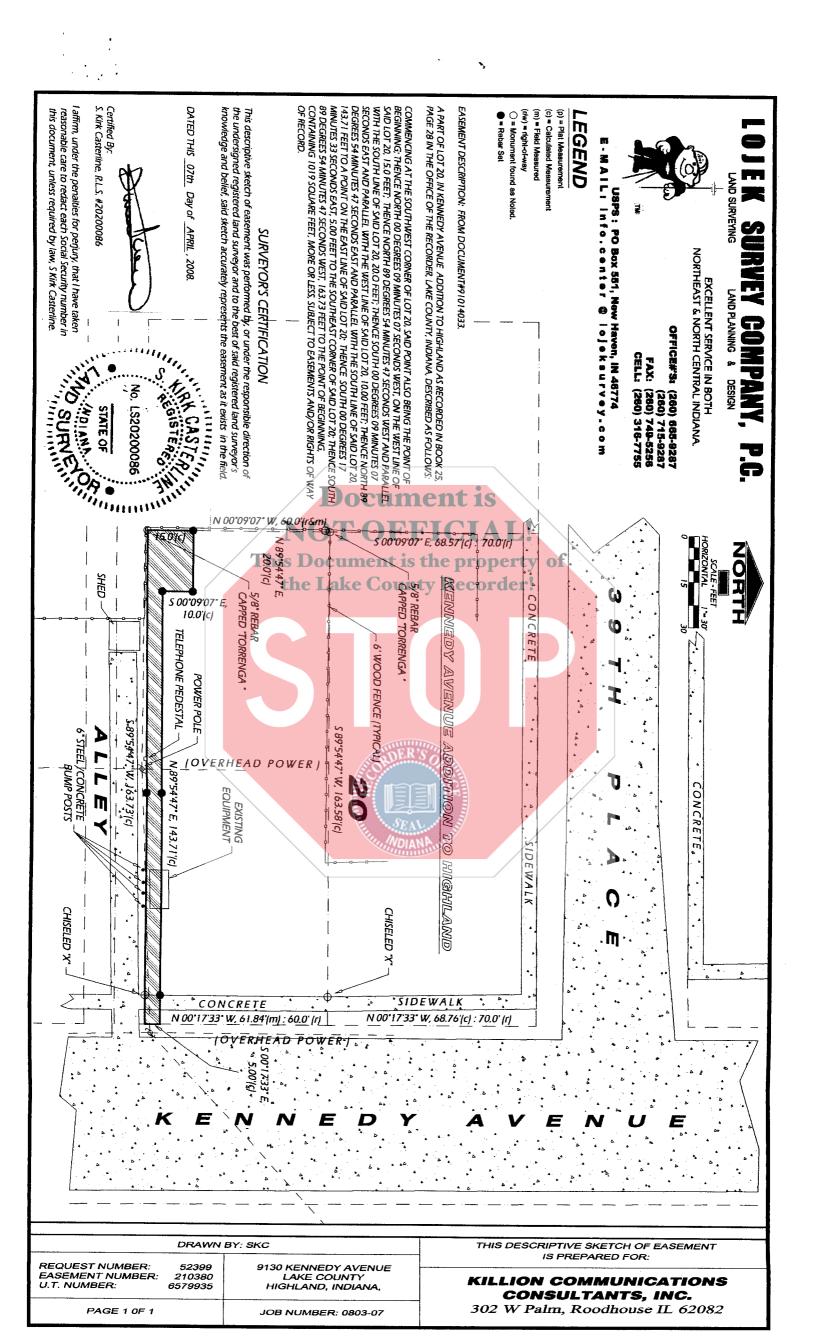
I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless

required by law.

NAME Luclette Ozirsky

Nicolette Ozirsky

Columbus, Indiana 47201



#### POWER OF ATTORNEY

### BEATRICE ZEILENGA

### ARTICLE I

### DESIGNATION OF AGENT

I, BEATRICE ZEILENGA, of Lake County. State of Indiana, being a mentally competent adult, do hereby designate and appoint JANICE BARICKMAN of Kane County. State of Illinois, as my true and lawful Attorney-in-Fact, hereinafter sometimes referred to as my Agent, giving my Agent full authority and power to make financial, asset management, and personal decisions for me in my name, place and stead as authorized in this document.

If my Attorney-in-Fact as hereinabove designated and appointed should die, become mentally or physically incapacitated, resign, refuse to act, become unavailable, or become legally separated or divorced from me (in the event my Agent is my spouse), I then and do hereby designate and appoint BEVERLY HAMILTON of Severe County, State of Tennessee, as my successor Attorney-in-Fact.

# ocument is

I hereby revoke all powers of attorney, general or limited, heretofore granted by me as principal and terminate all agency relationships created under any such prior powers, including those of all successor agents named or contemplated therein, if any

### ARTICLE III

# GENERAL ASSET AND FINANCIAL POWERS

My Attorney-in-Fact is authorized, in his sole and absolute discretion from time to time and at any time, with respect to any and all of my property and interests in property, real, personal and mixed, and matters affecting my financial and personal interests, by way of illustration and not intending any limitation, to proceed on my behalf as stipulated under the following sections of the Indiana Code governing powers of attorney:

· · · [	and the following sections of the indiana Code governing powers of attorned
IC § 30-5-5-2	Conferring general authority with respect to real property transactions.
IC § 30-5-5-3	Conferring general authority with respect to tangible personal property transactions.
IC § 30-5-5-4	Conferring general authority with respect to bond, share and commodity transactions.
IC § 30-5-5-5	Conferring general authority with respect to banking transactions.
IC § 30-5-5-6	Conferring general authority with respect to business operating transactions.
IC § 30-5-5-7	Conferring general authority with respect to insurance transactions.

IC § 30-5-5-8 Conferring general authority with respect to beneficiary transactions.

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16230 Louis Ave.
South Holland, IL 60473

708-339-1070

- IC § 30-5-5-9 Conferring general authority with respect to gift transactions.
- IC § 30-5-5-10 Conferring general authority with respect to fiduciary transactions.
- IC § 30-5-5-11 Conferring general authority with respect to claims and litigation.
- IC § 30-5-5-12 Conferring general authority with respect to family maintenance.
- IC § 30-5-5-13 Conferring general authority with respect to benefits from military service.
- IC § 30-5-5-14 Conferring general authority with respect to records, reports, and statements.
- IC § 30-5-5-15 Conferring general authority with respect to estate transactions.
- IC § 30-5-5-18 Conferring general authority with respect to delegating authority.
- IC § 30-5-5-19 Conferring general authority with respect to all other matters.

I hereby incorporate by reference all the powers granted an Attorney-in-Fact under IC §§ 30-5-5-2 to 30-5-5-19. However, I am specifically excluding IC § 30-5-5-16 conferring general authority with respect to health care powers and IC § 30-5-5-17 conferring general authority with respect to withdrawing or withholding of medical treatment on behalf of the principal from this power of attorney. I grant the powers enumerated in this power of attorney to **JANICE BARICKMAN** or his successor under this document.

### ARTICLE IV

# PROVISION APPLICABLE TO ARTICLE III

With respect to Article III (general asset and financial powers), it is to be understood that the authority I have conferred to my Attorney-in-Fact in no way is intended to limit or restrict my own authority or decision making capabilities covering such powers and authority as long as I remain mentally competent.

making capabilities covering such powers and authority as long as I remain mentally competent.

Furthermore, this power of attorney and the authority I have conferred and specified under Article III above shall remain in full force and effect until such time as I may hereinafter revoke the same in writing, provided further, that the same shall not be affected by my subsequent disability, incompetence, or lapse of time.

### ARTICLE V

### THIRD-PARTY RELIANCE

No person who relies in good faith upon any representations by or authority of my Attorney-in-Fact, shall be liable to me, my estate, my heirs or assigns for recognizing such representations or authority.

### ARTICLE VI

## NOMINATION OF GUARDIAN

In the event a judicial proceeding is brought to establish a guardianship over my person or property, I hereby nominate my Attorney-in-Fact, JANICE BARICKMAN, hereinabove designated and appointed, to be my guardian. In the event that he dies, resigns, is unable to serve, then I nominate BEVERLY HAMILTON as my alternate guardian.

## ARTICLE VII

### EFFECTIVE DATE

This power of attorney shall become effective upon my incapacity and disability wherein I am no longer able to personally handle my financial and business affairs or take care of my personal needs. I direct the named Attorney-in-Fact to secure a medical statement from my doctor with regard to my condition prior to assuming his

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16230 Louis Ave. South Holland, IL 60473 708-339-1070 authority under this document. This limitation as to the effective date of this Power of Attorney being restricted to my mental or physical disability, does not restrict or limit my authority to request that my Attorney-in-Fact proceed under this Power of Attorney and assume their designated responsibilities as set out in this document upon my request prior to any mental incapacity or physical disability, but rather as a matter of convenience on my behalf.

### ARTICLE VIII

### MISCELLANEOUS PROVISIONS

- 1. This durable power of attorney is intended to be valid and given full faith and credit in any jurisdiction or state in which it is presented.
- 2. My Attorney-in-Fact shall not be entitled to any compensation for services performed hereunder, but shall be entitled to reimbursement for all reasonable expenses incurred and paid, including transportation costs, as a result of carrying out any provisions of this instrument.
- 3. My Attorney-in-Fact, including his heirs, legatees, successors, assigns, personal representatives, and estate, acting in good faith hereunder, are hereby released and forever discharged from any and all liability (including civil, criminal, administrative or disciplinary), and from all claims or demands of all kinds whatsoever by me or my heirs, legatees, successors, assigns, personal representatives, or estate, arising out of the acts or omissions of my Attorney-in-Fact, except for willful misconduct or gross negligence.
- 4. My Attorney-in-Fact is authorized to make photocopies of this instrument as frequently and in such quantity as he shall deem appropriate. Each photocopy shall have the same force and effect as any original.
- 5. If any part or provision of this instrument shall be invalid or unenforceable, such part or provision shall be ineffective to the extent of such invalidity or unenforceability only, without in any way affecting the remaining parts or provisions of this instrument.
- 6. This instrument, and actions taken by properly authorized hereunder, shall be

binding upon me, my heirs, successors, assigns, legatees, guardians and personal representatives.			
IN WITNESS WHEREOF, I have hereunto executed this Durable Power of Attorney the	is 20 <sup>+</sup> L day of		
B. latrice 3 cilenga			
BEATRICE ZEILENGA			
STATE OF INDIANA  ) SS			
COUNTY OF LAKE			
Before me, the undersigned, a Notary Public in and for said County and State, personal BEATRICE ZEILENGA, who acknowledged the execution of the foregoing General Durab this 20th day of Loury, 2006.	ly appeared le Power of Attorney		
WITNESS my hand and notarial seal.			
Notary Public CAROLA VANDERNOCKO			
My Commission expires:			
08-27-2010 Resident of Kake County			

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