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2008 SEP 22 PM 1:08

MICHAEL A. BROWN
RECORDER

**SWORN STATEMENT OF INTENTION TO HOLD LIEN
(NOTICE OF MECHANIC'S LIEN)**

To: MD Construction Enterprises
5168 E 81st Ave. Merrillville, IN 46410

Owner's name and address

State of Indiana, county of Lake ss:

The undersigned being first duly sworn, makes this sworn statement of intention to hold a lien upon the property described below and says that:

1. The undersigned Graham's Trucking + Excavating, Inc

14445 Morse St. Cedar Lake, IN 46303

intends to hold a lien on land legally described as follows:

Lot 316 Doubletree Lake Estates West, Phase Eight, as per plat thereof, recorded in plat book 102 page 5, in the office of the Recorder of Lake County Indiana

And commonly known as:

10380 Nelson St. Crown Point Indiana

Street

City

State

As well as on all building, other structures and improvements located thereon or connected therewith for work and labor done and/or materials and machinery furnished by the undersigned in the erection, construction, altering, repairing, and removing of said buildings, structures and improvements.

2. The amount claimed under this statement is fifty three hundred eighty dollars \$ 5380.00 and 00/100

3. The work and labor were done, and materials and machinery were furnished by the undersigned within the last sixty (60) days.

George Snure
Signature

George Snure
Name Printed

State of Indiana, Lake County ss:

Before me a Notary Public in and for said county and State, personally appeared George

Snure - President and who acknowledged the execution of the foregoing intention to Hold Mechanics Lien.

Witnesseth my hand and seal this 22nd day of September, 2008.

My commission expires 6-19-2014 Patricia Snure Notary Public

Resident of Lake County Patricia Snure Name printed

I hereby certify that I have this date _____, 20____ mailed a duplicate of this notice, first class, postage prepaid, to the within property owner at (latest address shown on tax records)

Recorder of Lake County

This instrument was prepared by Amanda Seim, Resident of Porter County

I affirm under penalties of perjury, that I have taken reasonable care to redact each social security in this document, unless required by law.

(Signature) Amanda Seim

(Name Printed) Amanda Seim

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