

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

To: Bry Real Estate - G C Construction

10971 Four Seasons Pl Suite 121B Crown Point, IN 46307

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 on the property described below and says that:

1. The undersigned Economy Well Service, Inc.

5110 W 133rd Ave Crown Point, In 46307

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

Legal Description: Lee Cove Lot 5

Tax Key# 45-15-23-156-012.000-043

2009 025063

And commonly known as:

12817 Lee Ct. Cedar Lake, In 46303

Street Lake City

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 Three Thousand Two Hundred Dollars .00

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

[Signature]
Signature

Elmer J. Glade
Name Printed

State of Indiana, Lake County ss:

Before me, a Notary Public in and for said county and State, personally appeared Elmer J Glade and who acknowledged the execution of the foregoing Intention to Hold Mechanics Lien.

Witnesseth my hand and seal this 20th day of April, 2009.

My commission expires March 1st 2016 Tina L Graham Notary Public

Resident of Lake County TINA L GRAHAM Name printed

I hereby certify that I have this date April 20th, 2009 mailed a duplicate of this notice, first class, postage prepaid, to the within property owner at (latest address shown on tax records)

5110 W 133rd Ave Crown Point

14⁰⁰
CK 17229

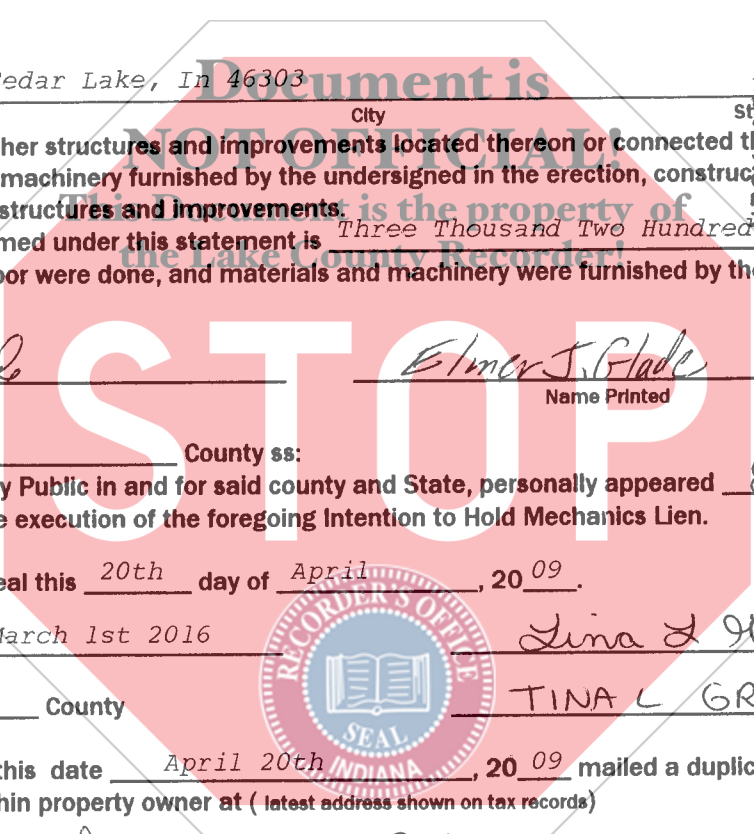
Recorder of RM County

This instrument was prepared by Tina L Graham, Resident of Lake 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) Tina L Graham

(Name printed) TINA L GRAHAM



2009 APR 29 PM 3:30
MICHAEL A. BROWN
RECORDER
STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD