2010 075373

NOTICE OF LIEN FOR DELINQUENT SEWER ACCOUNT

TO THE RECORDER OF LAKE COUNTY, INDIANA:

Pursuant to IC 36-9-23, the undersigned District 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:
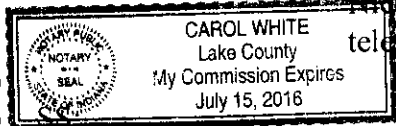
Legal description:	DALECARLIA BLOCK 21 LOT 11
Old Property Key Number:	02-03-0103-0011
New Property Key Number:	45-19-12-157-006.000-007
Owner(s):	MICHAEL P & PATRICIA J DUERIG H&W
Property address:	413 LAKEVIEW COURT, LOWELL, IN 46356
Mailing Address:	413 LAKEVIEW COURT, LOWELL, IN 46356
Account No:	46618100
Delinquency date:	12-21-2010

Delinquent Sewer fees:	515.30
Penalties (10%):	51.56
Delinquent Stormwater surcharge.	0.00
Penalties:	0.00
Lien recording fee:	11.00
Lien Release recording fee:	13.00
Certification fee :	20.00
Statutory service charge:	5.00
TOTAL:	615.86

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.

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

STATE OF INDIANA)
COUNTY OF LAKE)

[Notary seal: CAROL WHITE, Lake County, My Commission Expires July 15, 2016]

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 __21__ day of __December_____, 2010.

My Commission Expires: July 15, 2016
Resident of Lake County, Indiana

Carol 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: _____ Date signed: __12-21-10__
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