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2011 MAY -4 PM 3:46

MICHAEL J. JOHNSON
RECORDER

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

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

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.
P.O. Box 70
Crown Point, IN 46308

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



Lot 13 in Wynbrook Subdivision, Phase 1, as per plat thereof recorded in Plat Book 100, page 76, and as amended by Plat Amendment Certification recorded February 21, 2007 as Document No. 2007-015103, and further amended by Plat Amendment Certification recorded July 24, 2007 as Document No. 2007-060196, in the Office of the Recorder of Lake County, Indiana

And commonly known as:

11103 Wynbrook Dr. Crown Point IN
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 Eleven thousand two hundred eighty dollars & no cents
\$ 11,280.00.

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

Sarah E. Wiese Sarah E. Wiese
Signature Name Printed

State of Indiana, Lake County ss:
Before me a Notary Public in and for said county and State, personally appeared Sarah E. Wiese
Agent and who acknowledged the execution of the foregoing intention to Hold Mechanics Lien.

Witnesseth my hand and seal this 4th day of May, 2011.

My commission expires 6/19/2014 Patricia G Snure Notary Public

Resident of Lake County Patricia G Snure Name printed

Recorder of Lake County

This instrument was prepared by Sarah E. Wiese, 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) Sarah E. Wiese (Name Printed) Sarah E. Wiese



Patricia G Snure
Notary Public, Seal State of Indiana
Lake County
My Commission Expires 06/19/2014

AMOUNT \$ 13
CASH CHARGE _____
CHECK # _____
OVERAGE _____
COPY _____
NON-COM _____
CLERK CS