2013 056301

STATE OF INDIANAL LAKE COUNTY
FILED FOR RECORD

2013 JUL 31 PM 1:21

MICHAEL B. BROWN RECORDER

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 22 L.7 New Property Key Number: 45-19-12-126-009.000-007 Owner: WILLIAM B MICHIELS Property address: 469 LAKEVIEW COURT, LOWELL, IN 46356 Mailing Address: 469 LAKEVIEW COURT, LOWELL, IN 46356 Account No: 46787401 Delinquency date: 7-2**1-2013CUMEN** Delinquent Sewer fees: . 259.04 Penalties (10%): Delinquent Stormwater surcharge current is the property of 0.00 Penalties: the Lake County Recorder! Lien recording fee: 11.00 13.00 Certification fee: 20.00 5.00 TOTAL:

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

333.96

STATE OF INDIANA

COUNTY OF LAKE

CAROL WHITE CLEPITONE: (219) 696-4035
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 3. day of yelly ______, 2013.

My Commission Expires: July 15, 2016

Nicole Walkowiak

Resident of Lake County, Indiana

Carol Ithete

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:
Printed:

Walker Date signed:

7-23/13

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

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