

2

STATE OF INDIANA  
LAKE COUNTY  
FILED FOR RECORD

2014 004463

2014 JAN 23 PM 2: 14

MICHAEL S. DROWN  
RECORDER

When recorded, mail to: The Islands of Barrington Ridge

Name: Townhomes Association, Inc.

Address: P.O. Box 134

City/State/Zip: Hobart, IN 46342

Document prepared by: The Treasurer

Name: The Islands of Barrington Ridge Townhomes Assoc., Inc

Address: P.O. Box 134

City/State/Zip: Hobart, IN 46342

## Claim of Lien



State of Indiana

County of Lake

I the treasurer of the Islands of Barrington Ridge Townhomes Association, Inc., being duly sworn, state the following: In accordance with an agreement to provide labor and/or material, I did furnish the following labor and/or materials: delinquent quarterly dues for the common area maintenance and repairs as stated in the by-laws of the covenants and restrictions 94014409 dated the 17<sup>th</sup> day of February, 1994 of the Islands of Barrington Ridge Townhomes Association, Inc.

on the following described real property located in Lake county, State of Indiana, commonly known as:

1482 Lake St. Hobart, IN 46342 and legally described as: Barrington Ridge Unit 3 Lot 8 EX. S'LY of 45-13-05-302-002.000-018 27-17-0292-0052

which property is owned by Gregory N. Doby, whose address is 1482 Lake St. Hobart, IN 46342, of a total value of \$413, of which there remains unpaid \$413, and I further state that I furnished the first of the items on the date of July 1, 2013, and the last of the items on the date of December 31, 2013.

I hereby, under the laws of the State of Indiana, claim a lien against the above-described property in the amount of money, stated above, which remains unpaid to me.

Bill Dobbie

Signature of Person Claiming Lien

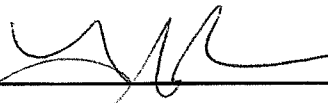
The treasurer of The Islands of Barrington Ridge Townhomes Association, Inc.

Name of person Claiming Lien

Address of person claiming lien: P.O Box 134 Hobart, IN 46342

CK# #13  
1723  
CA

On January 22, 2014, Bill Sedlcek came before me personally and, under oath, stated that she is the person described in the above document and that she signed the above document in my presence.

  
\_\_\_\_\_  
Notary Signature  
Notary Public,

In and for the county of Cole State of Indiana

My commission expires: 4/17/20



**CERTIFICATE OF MAILING**

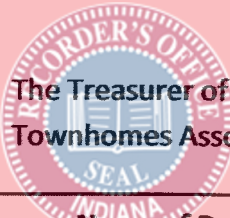
**Document is NOT OFFICIAL!**  
This Document is the property of  
I, The Treasurer of the Islands of Barrington Ridge Townhomes Association, Inc.,

certify that on this date, January 20, 2014, I have mailed a copy of this Claim of Lien by **USPS certified mail, return receipt requested**, in accordance with the law, to:

Name: Gregory N. Doby

Address: 1482 Lake St. Hobart, IN 46342

Date: 1/20/ 2014



The Treasurer of the Islands of Barrington Ridge  
Townhomes Association Inc.,

\_\_\_\_\_  
Signature of Person Mailing Claim of Lien

\_\_\_\_\_  
Name of Person Mailing Claim of Lien