

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2014 007487

2014 FEB -7 AM 10:40

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

MICHAEL B. BROWN
RECORDER

To: Newcastle Homes LLC
1216 Leinster St.
Lemont, IL 60439

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:

Lake Hills Resubdivision Unit 1 Lot 241, an addition to the town of St. John, as per plat thereof, recorded in Plat book 96, page 40, in the Office of the Recorder of Lake Co. Indiana
Parcel #: 45-11-28-427-002.000-035

And commonly known as:

8929 Parkside Ln St. John 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 Fifteen hundred dollars & no cents
\$ 1,500.00.

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 6th day of February, 2014.
My commission expires 6/19/2014
Resident of Lake County Patricia G. Shure Notary Public
Patricia G. Shure 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

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

