STATE OF INLIA AKE COUNT FILED FOR RECORL

2014 048888

2014 AUG 14 AM 8: 49

MICHAEL B. BROWN

RELEASE OF EASEMENTS TAKEN FOR TEMPORARY RICHT OF WAY

COUNTY: ROAD PROJECT:

Lake 169th Street Phase II

This indenture, executed this 23 day of 2014 witnesseth that certain portions of real estate, recorded as set out below and acquired for use on the above referenced road project, in the City of Hammond, State of Indiana, are

subject to a temporary easement. BOOK/PAGE INSTRUMENT PARCEL OWNER 2014033018 14A David D. & Cynthia M. DeWitt Whereas, the purpose for which said temporary easements were acquired have been accomplished and a release of the temporary easements will not interfere with any accomplished and a release of the temporary easements will not interfere with any operations or construction of the City of Hammond.

Now, therefore, in consideration of the premises, the undersigned does hereby irrevocably release unto the present owner or owners of record, their heirs, administrators, executors, personal representatives, devisees, grantees, successors, and assigns, all temporary easements in the instrument as set out above. In witness whereof, the City of Hammond has caused this instrument to be duly executed this $\frac{23}{4}$ day of $\frac{2014}{4}$. Quely CITY OF HAMMOND Taken in the name CITY OF HAMMOND, INDIANA Mark Gordis STATE OF INDIANA) Assistant City Engineer SS COUNTY OF LAKE) Personally appeared before me, a notary public for said county and state, this Assistant City Engineer and acknowledged the execution of the release of easements taken for temporary right of way to be this free and voluntary act and deed and the free and voluntary act and deed of said City of Hammond, Indiana. NDA MARINKOVIC Notary (Printed) LINDA A. MARINKOVIC Commission Expires: Lake County My Commission Expires County of Residence: July 5, 2017 AUG 1 3 2014 This instrument prepared by Kristina Kantar, Attorney at Law, PECCY HOLINGAKATONA Hammond IN 46320 LAKE COUNTY AUDITOR "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 Name na Kantar 00 **AMOUNT \$** CHARGE NO SALES DISCLOSURE NEEDED

03521

Approved Assessor's Office

CASH_ CHECK#.

CVERAGE COPY

NON-CONF. DEPUTY.