

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2015 068021

2015 OCT -2 PM 2:01

MICHAEL B. BROWN
RECORDER

GENERAL RELEASE OF LIEN

KNOW ALL MEN BY THESE PRESENTS: That the Building Permit Fee Obligation Lien claimed by the Town of St. John, Lake County, Indiana, a Municipal Corporation, upon the following described real property, to wit:

PARCEL IDENTIFICATION NUMBER (PIN): 45-11-33-451-009.000-035

LEGAL DESCRIPTION: LOT 86 THREE SPRINGS ADD. #2 P.B. 100, PG. 50
IN THE OFFICE OF THE RECORDER OF LAKE CO. IN.

Commonly known as: 10131 W 99TH Ave

Executed and delivered by: M + J HOMES

is hereby released, the claim thereunder having been fully paid and satisfied, and that certain notice of the Building Permit Fee Obligation Lien recorded as document number 2015 026613 in the Office of the Recorder of Lake County, Indiana, is hereby satisfied and discharged.

I, Sherry P. Sury, Clerk-Treasurer of the Town of St. John, Indiana, a Municipal Corporation, hereby swear or affirm under the penalties for perjury that the above and foregoing representations are true to the best of my knowledge.

Document is NOT OFFICIAL! This Document is the property of the Lake County Recorder!

Date: 9-29-15

Signed: Sherry P. Sury
Sherry P. Sury, I.A.M.C., C.M.C.
Clerk-Treasurer

THHERESA A. WILSON
Notary Public
SEAL
State of Indiana
Commission #658890
My Commission Expires October 29, 2022

State of Indiana)

County of Lake)

Before me the undersigned, A Notary Public in and for the State of Indiana, personally appeared Sherry P. Sury, I.A.M.C. C.M.C., Clerk-Treasurer of the Town of St. John, Lake County, Indiana, a Municipal Corporation, and, being first duly sworn upon he oath, says that the facts alleged in the foregoing General Release of Lien instrument are true. Signed and sealed this 29 day of Sept., 2015.

County of Residence: LAKE



Theresa A. Wilson
Notary Public, signature

My Commission expires: 10-29-2022

THHERESA A. WILSON
Notary Public, printed

I affirm, under the penalties of perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law and this document was prepared by Attorneys David M. Austgen, AUSTGEN KOEHLER & ASSOCIATES, P.C., 130 N. Main Street, Crown Point, Indiana 46307

AMOUNT \$ 12-
CASH ✓ CHARGE _____
CHECK # _____
OVERAGE _____
COPY _____
NON - COM _____
CLERK MS