STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2016 006854

2016 JAN 29 PM 12: 11

MICHAEL 8. BROWN RECORDER

Hyrra Elegtris 2655 Gariield Avenue Highland, Indiana 46322 (219) 923-6100 Fax: (219) 838-3631

	Fax: (219) 838-3631	
<u>N</u> (	OTICE TO NON-OCCUPYING OV	VNER OF SINGLE OR DOUBLE FAMILY DWELLING
To:	RH of Indiana LP	
	1141 E Main Street Suite 108 East Dundee IL 60118	Date: <u>January 28, 2016</u>
to deli doubl		January 28 <sup>th</sup> our firm has begun rials on credit for the original construction of your single or 1158 Tennessee Street Crown Point, Indiana, legally erials were furnished to:
RH	of Indiana N114TE	ast Main Street   A   East Dundee, IL 60118
(Na	me)	(Address) nent is the property of
We ui	nderstand that said dwelling is for	e County Recorder! your intended occupancy on said real estate.
be yo dwelli the L	ur duly author <mark>ized contractor or s</mark> ng improvements. Your name, as	ned and delivered to: RH of Indiana who we understand to ubcontractor, retained to construct, erect, and install said owner, was furnished by the transfer of books on either ndiana Code 6-1.1-5-4) or the Lake County, Indiana,
(1115 Electr \$425. We ar within	00 (Four-Hundred-Twenty-Five-Dre required by law (Indiana Code	above address will be furnished for the sum of: oldars-and-no/100). Bection 32-28-3-1 ©) ) to furnish this written notice to you tioned date of the first performance of labor or delivery of
		EMCOR Hyre Electric Co. of Indiana, Inc. 2655 Garfield Avenue Highland, Indiana 46322
		By: Nancee C. Tomassoni, Vice President
-	ommission Expires: <u>March 7, 202</u> by of Residence: <u>Lake</u>	Melissa Orban Notary Public - State of Indiana Lake County
This i	nstrument prepared by Cheryl Yol	My Commission Expires Mar 7, 2021  Novich, a resident of <u>Lake</u> County, Indiana.
Secur	m, under penalties for perjury, that ity number in this document, unle	s I have taken reasonable care to redact each Social ss required by law.
RETU EMC( 2655	JRN TO: DR Hyre Electric Co. Of Indiana Garfield Avenue and JN 46322	AMOUNT \$

CASH \_\_\_\_\_\_ SHA CHECK #\_\_\_\_\_ OVERAGE \_\_\_\_ COPY \_\_\_\_ NON-COM \_\_\_\_ CLERK \_\_\_\_