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7 2016 014681 STATE OF IMPLANTA LAKE COUNTY FILED FOR RECORD

2016 MAR | | AM | |: 15

MICHAEL B. BROWN RECORDER

-

Above Space Reserved for Recording

[If required by your jurisdiction, list above the name & address of: 1) where to return this form; 2) preparer; 3) party requesting recording.]

Claim of Lien	
Date of this Document: 3-4-16	
Reference Number of Any Related Documents: Thybice#5649298, 5649361+56493	364
Name Installed Building Products Lledba Momper Insulestreet Address 280 Madress Street Address	etic
City/State/Zip Document is 30	
Name Street Address City/State/Zip	
Abbreviated Legal Description (i.e., lot, block, plat, or section, township, range, quarter/quarter or unit, building and condo name):	
Assessor's Property Tax Parcel/Account Number(s): 45-15-03-253-004.000-015	
State of:County of:	
Before me, the undersigned Notary Public, personally Spheared (Lienor) who duly sworn says that he/she is (the Lienor) the agent of the Lienor herein) whose address is and that in accordance with a contract with (Debtor) lienor	
furnished labor, services or materials consisting of (describe specially fabricated materials separately):	
### 13.0C Page 1 of 2 #### Page 1 of 2 ###################################	

on the following described real property in	County, State (Describe real property sufficiently for identification, include)	ing
street and number): 10321 Golden St. John	Arch Avenue	
)	Own	
by JBT Land Development LLL	P own	nf a
total value of Five Thousand Ninety Five	Dollars (\$ 5,095.00) of which th	ere
remains unpaid Four Thousand Ninety F	TV2 Dollars (\$ 4,09500).	and
furnished the first of the items on July	10 , 20 15 , and the last of the items	on
September 3, 2015, and (if)	the lien is claimed by one not in privity with the Owner) that	the
by Wai	March 3 ,2010	2,
(method of service).		
		١
And, (if required) that the lienor served copies of the	notice on the contract on $7-10$, $8-11+9-1$ (method of service), an	<u>D</u> ,
20 15 by Mail	(method of service), an	ıd
on the subcontractor on	Dy	
	, 20	رم)
by	(method of service	LCJ.
Signed this	mentis , 20 16.	
Lienor:	FFICIAL	
By (officer or Agent)	unty Recorder!	
10000	unity Recorder.	
10120		
County of:		
On 3-4-1 before	me Joseph Saziano	
appeared In Density	, personally known to me (or prov	red
to me on the basis of satisfactory evidence) to be the		
and that by his/her/their signature(s) on the instrume	y executed the same in his/her/their authorized capacity(ies), nt the person(s), or the entity upon behalf of which the	
person(s) acted, executed the instrument.		
WITNESS my hand and official geal.	DER SOM	
AVITACS IN Hand Sid of India sea.		
I hay I de	CHRYSTIE MELVIN	
Signature of Notary	Notary Public, State of Indiana DIAN My Commission Expires January 12, 2023	
Affiant Known Produced D		
Type of ID		
(Seal)		

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