

2016 057328

2016 AUG 24 AM 8:52

MICHAEL B. BROWN
RECORDER

SWORN STATEMENT OF INTENTION TO HOLD LIEN

To: Stephen Spanola Revocable Trust, U/A/D July 19, 2005
Christine Spanola Revocable Trust, U/A/D July 19, 2005
Michael Riscossa and Elizabeth Riscossa, H&W
Lora Yurgil and Daniel Yurgil, H&W
26 W 085 Tomahawk Dr.
Wheaton, IL 60187

STATE OF INDIANA, COUNTY OF LAKE, SS:

The undersigned, being first duly sworn, makes and acknowledges this sworn statement of intention to hold a lien upon the property described below and says that:

1. The undersigned, Lakes of the Four Seasons Property Owners' Association, Inc., an Indiana Corporation, 1048 Lakeshore Drive, Crown Point, Indiana, 46307, intends to hold a lien on land legally described as follows:

Lot Numbered **846** in Lakes of the Four Seasons, Unit No. **4**, as shown on Plat Book **38**, Page **3**, in the Recorder's Office of Lake County, Indiana; Commonly known as **3419 W. Lakeshore Dr., Crown Point, IN**

46307.

as well as on all buildings, other structures and improvements located thereon or connected therewith.

2. The amount claimed under this statement is **One Thousand Nine Hundred Thirty-One Dollars and 62/100 (\$1,931.62)**, plus interest thereon.

3. This lien is in accordance with the terms and conditions in paragraph 1.3.3.4 of the Restrictive Covenants of Lakes of the Four Seasons as recorded in the Office of the Recorder of Lake, County, Indiana.

Lakes of the Four Seasons
Property Owners' Association, Inc.

By:

Richard G. Cleveland
Richard G. Cleveland

Subscribed and sworn to before me, a Notary Public, in and for said County and State, by Richard G. Cleveland, Community Manager of Lakes of the Four Seasons Property Owners Association, Inc., this 5 day of August 2016. Witness my hand and notarial seal.



Caryn L. Whitehead
Caryn L. Whitehead, Notary Public
Resident County: Lake

My Commission Expires: February 21, 2017

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.

Caryn L. Whitehead

I hereby certify that I have this ___ day of _____, 2016, mailed a duplicate of this notice, first-class postage prepaid, to the within named property owner at _____.

✓ Recorder of _____ County, Indiana
This Instrument prepared by: Brian E. Less, P.O. Box 98, Hebron, IN 46341

This communication is from a Debt Collector.
This is an attempt to collect a debt and any information obtained will be used for that purpose.

AMOUNT \$ 11-
CASH _____ CHARGE _____
CHECK # 50049
OVERAGE _____
COPY _____
NON-COM _____
CLERK AM E