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2016 AUG 24 AM 8:52

MICHAEL B. BROWN  
RECORDER

**SWORN STATEMENT OF INTENTION TO HOLD LIEN**

To: Jeannine J. Svetanoff  
2596 Brookwood Dr.  
Crown Point, IN 46307

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 66, Building #12, Parcel 4, Four Seasons Town Houses, Tract 106 in Lakes of the Four Seasons, as shown in Plat Book 49, Page 139, and amended by amended Plat as shown in Plat Book 51 page 44 being a part of Tract 106, Lakes of the Four Seasons Unit #1, as shown in Plat Book 37 page 63 in Lake County, Indiana; Commonly known as 2596 Brookwood 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.

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 # 50012  
OVERAGE \_\_\_\_\_  
COPY \_\_\_\_\_  
NON-COM \_\_\_\_\_  
CLERK AM