

2016 057749

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MICHAEL B. BROWN

SWORN STATEMENT OF INTENTION TO REORDER

To: **Anthony N. Pampalone, Jr. &
Jamie L. Pampalone, husband and wife
6304 W. Main Street
Lowell, IN 46356**

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, Lake Dalecarlia Property Owners' Association, Inc., an Indiana Corporation, 4665 Main, Lowell, Indiana, 46356, intends to hold a lien on land legally described as follows:

Lots 59, 60, 65 and 66, Block 23, Dalecarlia, as shown in Plat Book 23, page 78, in Lake County, Indiana, together with the South 15 feet of Carstens Drive North of and adjoining lots 59 and 60 and more particularly described as follows:

Beginning at the Northwest corner of Lot 60; thence North 15 feet; thence East 100 feet; thence South 15 feet to the Northeast corner of lot 59; thence West 100 feet along the North line of lots 59 and 60 to the point of beginning in Dalecarlia Blocks 23 and 24 as recorded in Plat Book 23, page 78 in the Office of the Recorder of Lake County, Indiana.

as well as on all buildings, other structures and improvements located thereon or connected therewith. Commonly known as: **6304 West Main Street, Lowell, IN 46356**

2. The amount claimed under this statement is **One Thousand Five Hundred Five Dollars & 04/100 (\$1,505.04)**, plus interest thereon.

3. This lien is in accordance with the terms and conditions in paragraph 5.B of the Restrictive Covenants of Lake Dalecarlia as recorded in the Office of the Recorder of Lake County, Indiana.

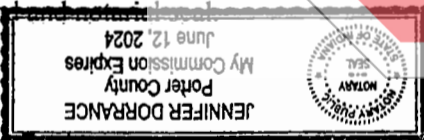
Lake Dalecarlia Property Owners' Association, Inc.

By: _____

Lane Linder, President

Subscribed and sworn to before me, a Notary Public, in and for said County and State, by Lane Linder, President of Lake Dalecarlia Property Owners' Association, Inc., on this 18 day of September, 2016.

Witness my hand _____



Jennifer Dorrance
Jennifer Dorrance, Notary Public
Resident County: Porter

My Commission Expires: 06/12/2024

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.

Jennifer Dorrance
Jennifer Dorrance

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, (21973-49), P.O. Box 98, Hebron, IN 46341

AMOUNT \$ 11-
CASH _____ CHARGE _____
CHECK # 2598
OVERAGE _____
COPY _____
NON - COM _____
CLERK AM E