FILED FOR RECORD

2016 079078

2016 NOV 21 PM 12: 38

## MICHAE AFFIDAVIT OF SCRIVENER'S EXERGER

		Project:	0810541	
		Code:	N/A	
		Parcel:	32 & 32A	
		Page:	1 of 2	
STATE OF INDIANA	)			
	)			
COUNTY OF LAKE	)			

Ronald L. Francis (Affiant), of lawful age, first being duly sworn upon my oath, disposes and says:

- 1. That I am an employee of Butler Fairman & Seufert, Inc. under contract by and acting on behalf of the City of Hobat to perform acquisition of Right-of-Way for Project 0810541, 3rd
- Street, Streetscape OT OFFICIAL!

  I have personal knowledge of the facts and maters stated herein.

  This Document is the property of

  Colleging instrument, through inadvertence, mistake and error contains a scrivener's 3. That the following instrument, through inadvertence, mista error within the consideration.

2016 002982 Instrument:

Estate of George A. Buzanowski, a/k/a George Buzanowski Grantors:

Grantee City of Hobart, Indiana Date of Instrument: December 11, 2015 Date Recorded: January 19, 2016

- 4. This Affidavit is being filed for recorded in the County of Lake, State of Indiana, for the purpose of correcting the consideration, core specifically, to correct (Nine Hundred Dollars (\$0.00) (of which said sum of \$0.00 represents land improvements/acquired and \$900.00 represents land temporarily encumbered and damages)).
- 5. The correct consideration should read as follows: (Nine Hundred Dollars (\$900.00)(of which said sum of \$0.00 represents land amages).

FILED

006822

NO SALES DISCLOSURE NEEDED

Approved Assessor's Office

NOV 21 2016

JOHN E. PETALAS LAKE COUNTY AUDITOR

Project: 0810541 Code: N/A Parcel: 32 & 32A Page: 2 of 2 Ronald L. Francis, Land Agent, Affiant ACKNOWLEDGEMENT BY INDIVIDUAL ) SS. Ronald L. Francis, personally known strument and being sworn by me stated that to me to be the person who executed the for best of his knowledge and belief, and et and deed. the Lake County Recorder! IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed my official seal in the county and state aforesaid the day and year above 1.7 piles & mable care to redact each Social Security Number in I affirm under penalties for perjury, that I have taken reast this document, unless required by law. Ronald L. Francis

Further Affiant saith not.

STATE OF INDIANA

COUNTY OF MARION

On this the 21st day of November

the facts and matters stated the

acknowledged to me that he

Signature

Printed Name

My Commission expires

This instrument prepared by: Ronald L. Francis

I am a resident of