STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2017 048097

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MICHAEL B. BROWN RECORDER

STATE OF INDIANA	)
	) SS

IN RE: MAGHAR SINGH, DECEASED

## **AFFIDAVIT FOR TRANSFER OF REAL PROPERTY**

Come now RACHHPAUL GILL of Crown Point, Indiana, PRITAM KAUR of Crown Point, Indiana, MANJIT K. RANDHAWA of Mundelein, Illinois and PARDEEP K. MAVI, of Palatine, Illinois who being duly sworn upon their oath, depose and state as follows:

- 1. That the affiants bear the following relationship to the Decedent: Pritam Kaur, wife; Rachhpaul Gill, son; Manjitrik, Randhawa, daughter and Pardeep K. Mavi, daughter.
- 2. That the Decedent died intestate on the 25<sup>th</sup> day of October, 2013, a resident of the State of Indiana as evidenced by his death certificate, a copy of which is attached hereto and marked Exhibit "A".
- 3. That no estate has been opened in the State of Indiana for the Decedent. That more than forty-five (45) days have passed since the death of the Decedent and no causes of action are currently pending against the Decedent, nor are any claims pending against the Decedent's estate for any debts or liabilities. In addition, more than one (1) year has elapsed since the date of the death of the Decedent.
- 4. That the value of the Decedent's gross probate estate less the costs and expenses of administration and reasonable funeral expenses does not exceed the sum of Fifty Thousand Dollars (\$50,000.00) as provided by I.C. 29-1-8-3.
- 5. That the Decedent at the time of the least owned a one-fourth interest in real estate in Crown Point, Lake County, Indiana (the "real estate"), the legal description of which is as follows:

LOT 91, STONY RUN ESTATES, PHASE TWO, UNIT 4, AS SHOWN IN PLAT BOOK 90 PAGE 95 IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Commonly known as 12464 Shelby Place, Crown Point, Indiana 46307 Parcel ID No.: 45-17-16-377-016.000-044

6. That the individuals entitled to the real estate as a result of the Decedent's death are:

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JOHN E. PETALAS

- a. RACHHPAUL GILL 12464 Shelby Place Crown Point, IN 46307
- b. PRITAM KAUR 12464 Shelby Place Crown Point, IN 46307
- c. MANJIT K. RANDHAWA 1048 Wrens Gate Mundelein, IL 60060
- d. PARDEEP K. MAVI
  217 S. Middleton Ave. Document is
  Palatine, IL 60067
- 7. That by reason of the above-stated matters, the affiants request that the decedent's undivided one-fourth (1/4) interest in the real estate be transferred to them pursuant to the laws of intestate distribution in accordance with the provisions of IC Sections 29-1-9-1, 29-1-8-2, and 29-1-8-3.
- 8. Each person's distributive share of the decedent's one-fourth (1/4) interest in the real estate has been calculated as follows:
  - a. PRITAM KAUR undivided 1/2 interest
  - b. RACHHPAUL GILL undivided 1/6th interest
  - c. MANJIT K. RANDHAWA undivided 1/6th interest
  - d. PARDEEP K. MAVI = undivided 1/6th interest
  - 9. That the current ownership of the real estate is as follows:
    - a. PRITAM KAUR undivided 9/24 interest
    - b. RACHHPAUL GILL undivided 7/24 interest
    - c. MANJIT K. RANDHAWA undivided 1/24 interest
    - d. PARDEEP K. MAVI undivided 1/24 interest
    - e. KIRANDEEP GILL undivided 6/24 interest
  - 10. That no inheritance tax is due as a result of the death of the Decedent.

11. That the gross value of the estate of the Decedent as determined for purposes of Federal Estate taxes, did not require the filing of a Federal Estate Tax Return. As a consequence thereof, the Decedent's estate was not subject to Federal Estate Tax.

FURTHER AFFIANTS SAYETH NOT.

STATE OF INDIANA

COUNTY OF LAKE

Before me, a Notary Public in and for said County and State, personally appeared RACHHPAUL GILL. Who acknowledged the Debutton of the Rofegging Affidavit.

the Lake County Recorder!

WITNESS my hand and Notarial Seal this 35 day of July 2017.

My Commission Expires: 3121

County of Residence:

OFFICIAL SEAC ADRIENCE HAMRICK NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES:03/07/21

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PRIT	AM I	<b>(AUR</b>					

NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:03/07/21

Each of the witnesses who have executed this document observed and witnessed as PRITAM KAUR, after explanation of the contents of the Affidavit for Transfer of Real Property by the Notary Public, made her mark by an "X". Witness to Signing by Grantor Document is NOT O Witness to Signing by This Document is the property of STATE OF INDIANA the Sake County Recorder! COUNTY OF LAKE COOK Before me, a Notary Public in and for said County and State, this , 2017 personally appeared PRITAM KAUR, and acknowledged the execution of this Affidavit for Transfer of Real Property to be her voluntary act and deed for the uses and purposes therein stated. PRITAM KAUR made her mark, an "X", in my presence after I explained the content and purpose of this Affidavit for Transfer of Real Property. Hamrige nted Name: My Commission Expires: County of Residence: OFFICIAL SEAL ADRIENNE HAMRICK

MANJIT K. RANDHAWA

STATE OF LL	)
COUNTY OF COOK	) SS:

Before me, a Notary Public in and for said County and State, personally appeared **MANJIT K. RANDHAWA** who acknowledged the execution of the foregoing Affidavit.

My Commission Expires:

My County of Residence:

My Commission Expires:

My County of Residence:

My Commission Expires:

My County of Residence:

My Commission Expires:

My

Parder K. Mari
PARDEEP K. MAVI

STATE OF
COUNTY OF <u>Cook</u> ) SS:
Before me, a Notary Public in and for said County and State, personally appeared PARDEEP K. MAVI who acknowledged the execution of the foregoing Affidavit.
WITNESS my hand and Notaria Seaths 15 Gay of Live, 2017.
This Document is the property of
the Lake County Reggeder!
Printed Name: Adviewe Hamiya
My Commission Expires: 3021
County of Residence:  McHenny  OFFICIAL SEAL ADRIENNE HAMRICK NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:03/07/21
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.  Security number in this document, unless required by law.  Security number in this document, unless required by law.
This instrument prepared by: Michael E. Anderson, #26001-45
Anderson & Anderson, P.C.
9211 Broadway Merrillville, IN 46410
(219) 769-1892
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## CERTIFICATION OF DEATH RECORD

## COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

DECEDENT'S LEGAL NAME MAGHAR SINGH		SEX MALE	DATE OF DEATH OCTOBER 25, 2013
COUNTY OF DEATH COOK	AGE AT LAST BIRTHDAY 81 YEARS	DATE OF BIRTH	
CITY OR TOWN ARLINGTON HEIGHTS		LOROTHER INSTITUTION NAME "HWEST COMMUNITY HOS	
PLACE OF DEATH INPATIENT			
PAKISTAN SOCIAL SE	CURITY NUMBER STATUS AT TIME OF DEAT	H SURVIVING SPONSE CIVIL UP	VION PARTNERS MAIDEN NAME FORCES? NO
RESIDENCE 12464 SHELBY PLACE	APT NO.	CROWN POINT	INSIDE CITY LIMITS
COUNTY STATE ZIP COLL LAKE IN 46307	GOPAL SINGH	RAM	CO PARENTS NAME PRIOR TO FIRST MARRIAGE/CIVIL
NFORMANT'S NAME PRITAM KAUR	This Document is	12464 SHELBY PLACE	CE CROWN POINT IN 46307
METHOD OF DISPOSITION CREMATION	PLACE OF THE COUNTRY SIDE CREMATORY	BARTLETT, IL	WN AND STATE DATE OF DISPOSITION OCTOBER 27, 2013
FUNERAL HOME - COUNTRYSIDE FUNERAL HOME -	BART, 950 SOUTH BARTLETT RO	AD, BARTLETT, IL, 60103	
UNERAL DIRECTOR'S NAME BENJAMIN THOMAS DETERMAN			AL DIRECTOR'S ILL NOIS LICENSE NUMBER 015942
OCAL REGISTRAR'S NAME DAVID ORR			ILED WITH LOCAL REGISTRAR TOBER 26, 2013
CAUSE OF DEATH PART I BRONCH	AL ASTHMA EXACERBATION		_ <u></u>
(Final disease or condition	Due to for as a consequ HMIA, ANEMIA, PNEUMONIA	rence of	XIIMAT BETV 40 DEZ
	TUNA, ANCINIA, FINCONONIA	SOU	APPRO ERVAL SET A
c. DESP VE	N THROMBOSIS/DEHYDRATION	one of	€ 6
	Dup to (or at a country)		
PART II. Enter other significant conditions contri	buting to death but not resulting in the underlying	ng cause given in PART I	WAS AN AUTOPSY PERFORMED? NO WERE AUTOPSY FINDINGS USED TO
EMALE PREGNANCY STATUS	NO!	MAInte	COMPLETE CAUSE OF DEATH? N/A  MANNER OF DEATH
NOT APPLICABLE			NATURAL
IATE OF INJURY	TIME OF INJURY PLACE OF	INJURY	NUW TA YRULMI
OCATION OF INJURY			
DESCRIBE HOW INJURY OCCURRED			IF TRANSPORTATION INJURY, SPE
TTEND THE DECEASED? DATE LAST SE	EN ALIVE WAS MEDICAL EXAMINER R 25, 2013 CORONER CONTACTED?		CED TIME OF DEATH 01:02 PM
CERTIFIER PHYSICIAN			DATE CERTIFIED OCTOBER 25, 2013
VAME, ADDRESS AND ZIP CODE OF PERSON CO HARBAN S MAVI, 350 WEST KINSI		INOIS, 60056	PHYSICIAN'S LICENSE NUMBER 036083443



This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.



