2017 058156

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MICHAEL B. BROWN RECORDER

NOTICE OF LIEN FOR DELINQUENT SEWER ACCOUNT

TO THE RECORDER OF LAKE COUNTY, INDIANA:

Pursuant to IC 36-9-23, the undersigned District Manager of Lake Dalecarlia Regional Waste District, a cipal corporation formed and acting pursuant to IC 13-26, hereby submits its notice of intention to hold a

	ing pursuant to IC 13-20, hereby submits its notice of intention to hold a
	enalties on the following described real estate, in the itemized amount
	ing thereafter until this lien is released, to-wit:
Legal description:	DALECARLIA L.27 BL.23
New Property Key Number:	
Owner:	DEUTSCH BANK NATIONAL TR
Property address:	335 W. LAKEVIEW DRIVE, LOWELL, IN 46356
Mailing Address:	1665 PALM BEACH LAKES BLVD, W. PALM BEACH, FL 33401
Account No:	46222801
Delinquency date:	8-2 B %cument is
Delinquent Sewer fees:	
Penalties (10%):	VOT.OFFICIAL! 25.92
Delinquent Stormwater surch	Document is the property of 0.00
Penalties:	Document is the property of 0.00
Lien recording fee:	he Lake County Recorder! 25.00
Lien Release recording fee: .	25.00
Certification fee:	
Statutory service charge:	<u>5.00</u>
TOTAL:	359.96
The undersigned further states	that the amount of said delinquencies and penalties so submitted are true
and correct computations as shown in	the records of Lake Dalecarlia Regional Waste District, Lowell, Indiana
and that no payment therefor has been	
	State of the state
	Nicola Wilcowiak, District Manager
	CAEGE Wit Fephone (219) 696-4035
STATE OF INDIANA)	Lake County My Comprission Expires
COUNTY OF LAKE) S	July 15, 2024
Δ1	and for said County and State, personally appeared Nicole Walkowiak
	the foregoing Notice of Lien for Delinquent Sewer Account, and who
_	alties of perjury, stated that the facts and matters therein set forth are true
and correct, this 22 day of 4	
and correct, and <u>-070 -</u> any or <u>-170</u>	2
My Commission Expires: July 15, 202	4 Caral Marta
Resident of Lake County, Indiana	Carol White, Notary Public
• •	firm, under the penalties for perjury, that I have taken reasonable care to
redact each Social Security number in	
reduct each boold becarty hamber in	۸-
Signature: (Lange While	Md Date signed: 32217
Printed: Nicole Walkowiak	Marie Bigliou.
Timod. Triode Walkowiak	

Return this document to: Lake Dalecarlia Regional Waste District

15901 Briargate Place Lowell, Indiana 46356

This instrument prepared by Timothy R. Sendak, Attorney at Law 209 South Main Street, Crown Point, Indiana 46307