

2017 069018

2017 OCT 12 AM 9:13

Mail tax bills to:
3354 WALLHAVEN CT,
CROWN POINT, IN, 46307

Parcel No. 45-17-16-177-018-000-044
MICHAEL D. BROWN
RECORDER

WARRANTY DEED

THIS INDENTURE WITNESSETH, That MICHAEL DUNLAP, ("Grantors")

of LAKE County in the State of Indiana

CONVEY (S) AND WARRANT (S) TO ROBERT MARTINEZ JR. and JENNIFER JOY MARTINEZ, husband and wife, ("Grantee")

of LAKE County in the State of Indiana

in consideration of One Dollar and other valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the following described real estate in LAKE County, in the State of Indiana:

LOT 1101, IN LAKES OF THE FOUR SEASONS, UNIT NO. 8, AS PER PLAT THEREOF, RECORDED IN PLAT BOOK 38, PAGE 88, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA.

Commonly known as: 3354 WALLHAVEN CT, CROWN POINT, IN, 46307
Grantee's address: 3354 WALLHAVEN CT, CROWN POINT, IN, 46307

Subject to: Taxes for 2016 and subsequent years, building lines, covenants and restrictions.

Dated this 5th day of October, 2017

NORTHWEST INDIANA TITLE
162 WASHINGTON STREET
LOWELL, IN 46356
219-696-0100



MICHAEL DUNLAP

State of Indiana County of Lake SS:

Before me, the undersigned, a Notary Public in and for said County and State, this 5th day of October, 2017, personally appeared: MICHAEL DUNLAP, and acknowledged the execution of the foregoing deed. In witness whereof, I have hereunto subscribed my name and affixed my official seal.

Notary Public

My commission expires:
County of residence:

RICHARD A. ZUNICA
NOTARY PUBLIC
SEAL
Porter County, State of Indiana
My Commission Expires August 31, 2022

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. RICHARD A. ZUNICA

This instrument prepared by: Attorney Richard A. Zunica, 162 Washington St., Lowell, In 46356
File No. 17-23082 REV1/

DULY ENTERED FOR TAXATION SUBJECT
FINAL ACCEPTANCE FOR TRANSFER

OCT 11 2017 027833

JOHN E. PETALAS
LAKE COUNTY AUDITOR

AMOUNT \$ 25
CASH _____ CHARGE _____
CHECK # 4006
OVERAGE _____
COPY _____
NON-COM _____
CLERK _____