

STATE OF INDIANA
LAKE COUNTY
FILED FOR RECORD

2017 086553

2017 DEC 20 PM 2:37

STATE OF INDIANA)
) SS:
COUNTY OF Lake)

MICHAEL B. BROWN
RECORDER

NOTICE OF LIEN RIGHTS

TO: **Robert A. Victor and/or Lisa A. Victor**
12435 Pennsylvania Street
Crown Point, IN 46307

You are hereby notified that Schilling Brothers Lumber & Hardware, Inc., furnished material and/or labor for the original construction or remodel of a single or double family dwelling to be or being constructed or remodeled on the property located at 12435 Pennsylvania Street, Crown Point, IN 46307 and legally described as follows: **PINE HILL PHASE TWO LOT 48** and, as a result thereof, Schilling Brothers Lumber & Hardware, Inc., has a right to claim a mechanic's lien against said real estate for the value of the material and/or services performed.

The first material was furnished on November 24, 2017 and was ordered by **United Services DKI** contractor. It is anticipated that additional material will be delivered during construction. Pursuant to I.C. 32-28-3-1, the furnishing and recording of this notice is a condition precedent to the right of acquiring a lien upon the above described real estate but upon the improvements constructed thereon.

DATE: **December 15, 2017**

By: **SCHILLING BROTHERS LUMBER AND HARDWARE, INC.**

Shirley M. Schilling
Shirley M. Schilling, Secretary, 8900 Wicker Ave., St. John, IN 46373

STATE OF INDIANA)
) SS:
COUNTY OF LAKE)

Before me, a Notary Public in and for said County and State, personally appeared Shirley M. Schilling who acknowledged the execution of the foregoing Notice of Lien Rights, and who having been duly sworn, under the penalties of perjury, stated that the facts and matters therein set forth are true and correct.

Witness my hand and Notarial Seal this *15th* day of *December*, 2017.

Jane Honberger
Jane Honberger
Notary Public

Jane Honberger
My Commission Expires 10/03/22
Resident of the County of Lake

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.

Shirley M. Schilling
PREPARED BY: Shirley M. Schilling, Secretary

This document prepared by: Shirley M. Schilling, Secretary

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