STATE OF INDIANA LAKE COUNTY FILED FOR RECORD

2019 056665

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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 municipal corporation formed and acting pursuant to IC 13-26, hereby submits its notice of intention to hold a lien for delinquent sewer fees and penalties on the following described real estate, in the itemized amount shown below, plus delinquencies accruing thereafter until this lien is released, to-wit:

Legal description:	DALECARLIA BLOCK 30 LOT 30
New Property Key Number:	45-19-01-330-008.000-007
Owner:	RICK KEATHLEY
Property address:	5527 W. 153 RD AVENUE, LOWELL, IN 46356
Mailing Address:	5527 W. 153 RD AVENUE, LOWELL, IN 46356
Account No:	63000100
Delinquency date:	8/Document is
Delinquent Sewer fees:	286.08
Penalties (10%):	IOT OFFICIALL 28.60
Delinquent Stormwater surch	Document is the property of 0.00
Lien recording fee: th	e Lake County Recorder! 25.00
Lien Release recording fee: .	25.00
Certification fee:	20.00
Statutory service charge:	5.00
TOTAL:	389.68
8	

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 received.

(219) 696-4035

STATE OF INDIANA COUNTY OF LAKE

SS:

Before me, a Notary Public in and for said County and State, personally appeared Nicole Walkowiak, who acknowledged the execution of the foregoing Notice of Lien for Delinquent Sewer Account, and who, having been duly sworn, under the penalties of perjury, stated that the facts and matters therein set forth are true and correct, this 2 5 day of ALGUST

My Commission Number: NP0719127 My Commission Expires: March 11, 2027 Resident of: Lake County, Indiana

Angela Burrows, Notary Public

Pursuant to IC 36-2-11-15, 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.

Date signed: ___

Signature: (Printed:

Nicole 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