## NOT AN OFFICIAL DOCUMENT

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|----|-----------------------------------|-------|---|---------|------------|
| 2  | OTATE OF BIDIANA                  |       | GINA PIMENTEL<br>RECORDER                           | 2021-0  | 012684     |
|    | STATE OF INDIANA ) COUNTY OF LAKE | ) SS: | STATE OF INDIANA<br>LAKE COUNTY<br>FILED FOR RECORD | 8:46 AM | 2021 Feb 9 |
|    |                                   | ,     |   |         |            |

RE: Parcel Number: 45-07-18-179-034.000-023 Address: 7538 Columbia Ave. Hammond, IN 46324

Owner of record: Chester M. Scieska

## CERTIFICATION OF BILL PURSUANT TO I.C. 36-1-6-2

Comes now Megan Flores and states:

- I am the Controller for the City of Hammond and am charged with collecting fees and penalties owed to the City of Hammond
- The condition of the above-described property was in violation of the ordinances of the City of Hammond.
- The Inspections Department of the City of Hammond has a) given the owner of record at least ten (10) days to remedy the condition of the property; b) remedied the condition after the failure of the owner to do so; and c) incurred the costs designated below.
- The City of Hammond, through its Inspections Department has issued a bill for the
  expenses to the owner of record and the bill has not been paid.
- The following amounts are owed to the City of Hammond: \$273.00 plus City
  administrative fee of \$200.00 plus the county fee of \$25.00 for a total of \$498.00 owed to
  the City of Hammond, and that amount should be placed on the tax duplicate as a lien in
  favor of the City of Hammond.

Dated: 2 | 202 | Megan Flores Controller City of Hammond

STATE OF INDIANA )
SS:
COUNTY OF LAKE )

Subscribed and sworn to before me, Notary Public, for the State of Indiana on this 1st day of February,

2021.

County of Residence: Lake

My Commission Expires: 1/23/25

Wotary, Linda Norville-Moles

Moles GP



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| WITNESS to the signature (s) on the foregoing instrument to which this Proof is attached.  Witness Signature  Chris Padzik  Witness Printed Name |  |  |  |  |  |
|--|--|--|--|--|--|
| State of Indiana   |  |  |  |  |  |
| ) SS:  |  |  |  |  |  |
| County of Lake )   |  |  |  |  |  |
| Before me the undersigned, a Notary Public for the State of Indiana, personally appeared   |  |  |  |  |  |