NOT AN OFFICIAL DOCUMENT

NOTICE OF LIEN FOR UNPAID HOMEOWNERS ASSOCIATION ASSESSMENT

To: Karen R & Kevin J Deal 801 Village Glenn Drive Lowell, IN 46356

YOU ARE HEREBY NOTIFIED that Sierra Ridge Homeowners Association, Inc., whose address is P.O. Box 1082, Crown Point, Indiana 46307, in accordance with Indiana Code §§32-28-14-5 and 32-28-14-6 and Section 7.7 of the Restrictive Covenants for the subdivision, holds a lien on the following described real estate:

Lot 84, Village Green Subdivision, Phase 2 Unit 1, as shown in Plat Book 99, Page 2, in the Office of the Recorder of Lake County, Indiana.

Common Address: 801 Village Glenn Drive, Lowell, Indiana 46356

Parcel ID: 45-19-22-177-004.000-038

and all improvements thereon for the amount of not less than \$200.00, plus interest accrued thereon from January 1, 2023 (the date such assessment was due), at the rate of eighteen percent (18%) per annum, for unpaid homeowners' association assessments, plus any other sums that may become due thereafter.

The undersigned individual executing this instrument, having been duly sworm upon his or her oath under the penalties of perjury, hereby states that the claimant intends to hold a lien upon the above-described real estate and that the facts and matters set forth in the foregoing statement are true and correct.

Name: Christopher Adams, Director Sierra Ridge Homeowners Association, Inc.

STATE OF INDIANA, COUNTY OF LAKE, SS:

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared the within named the State personally appeared the within named for said County and State, personally appeared the said County and State, personally appeared the said County and State, personally appeared the said County a

WITNESS, my hand and Notarial Seal this 13th day of Oct, 2023

Notary Public (signature)

RICHARD A. ZUNICA
Motary Public, State of Indiana
Commission Humber NP068593
My Commission Expires
0/31/2020

THIS INSTRUMENT PREPARED BY: Christopher Adams, Director

I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security Number in the document, unless required by law.

I hereby certify that I have this ____day of ______, 2023, mailed a duplicate of this notice, first-class postage paid to the within named property owner at

GINA PIMENTEL RECORDER STATE OF INDIANA

My Commission Expires: Notary County:

2023-028769

Recorder of ______ County, Indiana

9:42 AM 2023 Oct 18

LAKE COUNTY 8:42 AM
RECORDED AS PRESENTED

8:42 AM 2023 OC

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