NOT AN OFFICIAL BY: MA

PG #: 2 RECORDED AS PRESENTED

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GINA PIMENTEL RECORDER

NOTICE OF INTENT TO HOLD LIEN SANDALWOOD COMMUNITY ASSOCIATION, INC.

TO: Alice J. Kopack 8558 Orchard Avenue Highland, IN 46322

YOU ARE HEREBY NOTIFIED that Sandalwood Community Association, Inc. ("Association"), an Indiana non-profit corporation, whose contact address is: c/o Kovitz Shifrin Nesbit, 6125 S. East St., Suite A, Indianapolis, Indiana 46227, has filed a LIEN on your real estate commonly known as: 8558 Orchard Avenue, Highland, IN 46322 and legally described as follows:

Lot 12, except the North 43.5 feet thereof, in Sandalwood Subdivision, Phase One, an Addition to the Town of Highland, as per plat thereof, recorded in Plat Book 82 Page 91, in the Office of the Recorder of Lake County, Indiana.

as well as on all buildings, structures, and improvements located on the above real estate for the sum of Two Thousand Four Hundred Eighty-two Dollars and 00/100 (\$2,482.00), for unpaid assessments, late fees, and other charges as provided for in the Declaration of Covenants, Conditions, and Restrictions for Sandalwood, and any amendments thereto, recorded on July 21, 1997, as Instrument No. 97047035, in the Office of the Recorder of Lake County, Indiana. This lien also secures the costs of recording this lien, as well as all unpaid assessments, interest, costs, and unpaid reasonable attorney fees that are due or which may accrue after the date this Lien is recorded and prior to entry of a final judgment of foreclosure. For information regarding the amount currently duc, please contact: Kovitz Shifrin Nesbit, 6125 S. East St., Suite A, Indianapolis, Indiana 46227, (317) 536-7435.

SANDALWOOD COMMUNITY ASSOCIATION, IN

Signature

NOT AN OFFICIAL DOCUMENT

| STATE OF INDIANA) | |
|---|---|
| COUNTY OF <u>lake</u>) SS: | |
| Before me, the undersigned, a Notary Public in and for said County and State Such Topin who, having been duly sworn, under the penalties of pe is the Persident of Sandshwood Community Association, Inc. who execu- and that he/she has read the same and that the statements contained therein are true and ac | rjury, stated that he/she sted the foregoing Lien, |
| Witness my hand and Notarial Seal this 25 day of July 200 | 24. |
| My Commission Expires: | |
| 11-4-2026 Ren HSCh | |
| County of Residence: Kevin A Schwarz | |
| Parity of T | KEVIN A SCH SEAL Commission Number My Commission November 4, |
| I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security num | her in this decument unless |
| required by law. Zachary D. Cronkhite | op at the boundaries income |
| required by lear. Zachary D. Cronkhite This instrument was prepared by and should be returned to: Zachary D. Cronkkhite, | Kovitz Shifrin Nesbit, |
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