TATE OF INDIANA LAKE COUNTY RECORDED AS PRESENTED

12:32 PM 2024 Oct 25

## 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: DALECARLIA BL.2 LOTS 23, 24, 25

Legal description: Key Number: 45-19-12-132-003.000-007 Owner TRISH CULLUM Property address: 609 S. LAKEVIEW DRIVE, LOWELL, IN 46356

10/21/24

Mailing Address: 609 S. LAKEVIEW DRIVE, LOWELL, IN 46356 Account No. 36751000 Delinquency date:

Delinquent Sewer fees: . 297.56 Penalties (10%): . . . . 29 76 0.00 Penalties: . . . . . . . . . . . . 0.00 Lien recording fee: . . . . . 25.00 Lien Release recording fee: . . 25.00 Certification fee: . . . . . 20.00 Statutory service charge: . 5.00 TOTAL:

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.

Nicole Walkowiak, District Manager

STATE OF INDIANA ) COUNTY OF LAKE SS

Telephone: (219) 696-4035 ANGELA BURROWS SEAL March 11, 2027 Commission Number Ni Lake County er NP0719127

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 day of

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:

Nicole Walkowiak Printed:

Return this document to:

Lake Dalecarlia Regional Waste District 15901 Briargate Place

Lowell,Indiana 46356

This instrument prepared by David Kacmarik, Attorney at Law 209 South Main Street, Crown Point, Indiana 46307

25,5833