

AFFIDAVIT OF SURVIVORSHIP

Natalie Chaplin a/k/a Natalia Torrenza, being first duly sworn upon her oath, deposes and says:

1. That she is the wife of Brent A. Torrenza and has knowledge of the facts contained herein.
2. That Brent A. Torrenza died on March 27, 2017. A copy of the Death Certificate is attached hereto.
3. At the time of his death, he held title to real property with Natalie Chaplin a/k/a Natalia Torrenza as husband and wife, joint tenants with rights of survivorship, the same of which is more particularly described as:

LOT 15 IN RESUBDIVISION OF CASTLEWOOD UNIT 1, AN ADDITION TO THE TOWN OF DYER, AS PER FLAT THEREOF, RECORDED IN FLAT BOOK 51, PAGE 30, IN THE OFFICE OF THE RECORDER OF LAKE COUNTY, INDIANA, AND AMENDED BY CERTIFICATE OF CORRECTION RECORDED DECEMBER 4, 1979, AS DOCUMENT NO. 562652

Key No. 45-11-18-253-021.000-034

More Commonly known as 2528 Perry Court, Dyer, IN 46311

4. At the time of Brent A. Torrenza's death, Natalie Chaplin a/k/a Natalia Torrenza took sole title to the property in fee simple by virtue of being the surviving tenant.
5. That the purpose of this affidavit is to induce the Lake County Auditor to remove Brent A. Torrenza's interest from its records and to establish Natalie Chaplin a/k/a Natalia Torrenza as the sole owner in fee simple.

AFFIANT FURTHER SAYETH NOT.

[Signature]

Natalie Chaplin a/k/a Natalia Torrenza

STATE OF IN)
) SS:
COUNTY OF Lake)

Subscribed and sworn to before me, a Notary Public in and for said County and State personally appeared Natalie Chaplin a/k/a Natalia Torrenza and acknowledged the execution of the foregoing Affidavit of Survivorship this 12th day of October, 2024

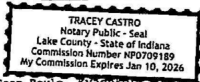
My Commission Expires:

09/10/2024

[Signature]
Notary Public

Resident of Lake County, IN

"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."
PREPARED BY: PK



THIS INSTRUMENT PREPARED BY: Attorney Sean Boyle, KVACHOLE LAW, Inc., 405 N. Main Street, Crown Point, IN 46307, 219-661-9500.

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12/01
CK

NOT AN OFFICIAL DOCUMENT

COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS MEDICAL EXAMINER/CORONER CERTIFICATE OF DEATH

STATE FILE NUMBER 2017 0027238 MEDICAL EXAMINER'S CASE NUMBER ME2017-01458 DATE ISSUED 8/12/2017

DECEDENT'S LEGAL NAME BRENT A TORRENZA		SEX MALE	DATE OF DEATH MARCH 27, 2017	
CITY OF DEATH COOK		AGE AT LAST BIRTHDAY 37 YEARS	DATE OF BIRTH MARCH 03, 1980	
CITY OR TOWN CHICAGO		HOSPITAL OR OTHER INSTITUTION NAME JOHN H. STROGER JR. HOSPITAL OF COOK CO		
PLACES OF DEATH EMERGENCY ROOM / OUTPATIENT				
BIRTHPLACE MUNSTER, IN	SOCIAL SECURITY NUMBER [REDACTED]	STATUS AT TIME OF DEATH MARRIED	SURVIVING SPOUSE/CIVIL UNION PARTNER'S SURVIVAL NAME NATALIA DOUGANIK	EVER IN U.S. ARMED FORCES? NO
RESIDENCE 2528 PERRY COURT	APT. NO.	CITY OR TOWN DYER	INSIDE CITY LIMITS? YES	
COUNTY LAKE	STATE IN	ZIP CODE 46311	FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION GARY PETER TORRENZA	MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION ANGELA CZARNECKI
INFORMANT'S NAME NATALIA TORRENZA		RELATIONSHIP WIFE	MAILING ADDRESS 2528 PERRY COURT, DYER, IN, 46311	
METHOD OF DISPOSITION CREMATION		PLACE OF DISPOSITION SOLAN PRUZIN CREMATORY	LOCATION - CITY OR TOWN AND STATE SCHERERVILLE, IN	DATE OF DISPOSITION APRIL 03, 2017
FUNERAL HOME SOLAN PRUZIN FUNERAL HOME & CREMATORY, 14 KENNEDY AVENUE, SCHERERVILLE, IN, 46375				
FUNERAL DIRECTOR'S NAME PAUL P GONZALEZ			FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER 034016715	
LOCAL REGISTRAR'S NAME DAVID ORR			DATE FILED WITH LOCAL REGISTRAR APRIL 1, 2017	
CAUSE OF DEATH PART I INTRACRANIAL GUNSHOT WOUND				
IMMEDIATE CAUSE (If not obvious or condition resulting in death)				
Due to (or as a consequence of):				
Due to (or as a consequence of):				
Due to (or as a consequence of):				
PART II Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I			WAS AN AUTOPSY PERFORMED? YES	
			WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? YES	
FEMALE PREGNANDY STATUS NOT APPLICABLE			MANNER OF DEATH SUICIDE	
DATE OF INJURY MARCH 27, 2017	TIME OF INJURY 09:45 PM	PLACE OF INJURY RESIDENCE	INJURY AT WORK? NO	
LOCATION OF INJURY 2528 PERRY COURT, DYER, IN, 46311				
DESCRIBE HOW INJURY OCCURRED: SELF-INFLICTED GUNSHOT WOUND				IF TRANSPORTATION INJURY, SPECIFY:
ATTEND THE DECEASED?	DATE LAST SEEN ALIVE	WAS MEDICAL EXAMINER OR CORONER CONTACTED?	DATE PROMULGATED MARCH 27, 2017	TIME OF DEATH 10:58 PM
CERTIFIER MEDICAL EXAMINER/CORONER			DATE CERTIFIED MARCH 29, 2017	
NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH PONNI ARUNKUMAR MD, 2121 W HARRISON ST, CHICAGO, IL, 60612			PHYSICIAN'S LICENSE NUMBER	



D00007060



This is to certify that this is a true and correct copy from the official death record filed with the Illinois Department of Public Health.

David Orr
David Orr
Cook County Clerk

