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2003-02-20 10:40:19
Cook County Recorder 32.50



0030240873

Illinois

02-15-18

SUBORDINATION AGREEMENT

02 NLT42624

This Subordination Agreement (this "Agreement"), granted this 24 day of JANUARY, 2003, by CHASE MANHATTAN BANK USA, N.A. ("Chase") to PRINCIPAL RESIDENTIAL MORTGAGE, INC (the "Lender"),

WITNESSETH:

WHEREAS, Chase has heretofore extended a line of credit/loan to MARSHALL RUBIN AND LYNN RUBIN (the "Borrower") pursuant to a Home Equity Line of Credit Agreement/Loan Note dated AUGUST 24, 1995 (the "Line of Credit/Loan"); and

WHEREAS, the Borrower's obligations under the Line of Credit/Loan 9890137095 are secured by a Mortgage from the Borrower to Chase, dated AUGUST 24, 1995, recorded AUGUST 25, 1995 in the Land Records of COOK County, Illinois as Document 95565914 (the "Home Equity Mortgage"), covering real property located at 7106 HAMLIN AVE, LINCOLNWOOD, IL 60712 (the "Property"); and

P.I.N. # 10-35-103-042 VOLUME 130

This document was prepared by CHASE MANHATTAN BANK USA, N.A., Home Equity Subordination, 20 South Clinton Avenue, S-3, Rochester, NY 14604 and after recording should be returned to: CMMC Records Management, 700 Kansas Lane, Monroe, LA 71203 ATTN: Alison Latino.

Home Equity Account Number 9890137095

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WHEREAS, the Lender proposes to make a loan in the original principal amount of \$63,700.00 to the Borrower (the "New Loan"), the proceeds of which will be used to repay in full all of the Borrower's original obligations secured by an original Mortgage, and to obtain a release of the lien created by the original Mortgage; and

WHEREAS, as a condition of making the New Loan, the Lender has required the Borrower to execute a mortgage on the Property securing repayment of the New Loan (the "New Mortgage"), which, upon execution and recordation of this Agreement, shall have a first lien position on the Property.

NOW, THEREFORE, in consideration of the premises and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, Chase hereby agrees as follows:

1. Chase hereby subordinates the lien created by the Home Equity Mortgage to the lien created by the New Mortgage to the end that the lien of the New Mortgage shall be superior to the lien of the Home Equity Mortgage.
2. The subordination described in paragraph 1. above shall not apply to any future advance of funds to the Borrower by the Lender except for advances necessary to protect the security of the New Mortgage.
3. This Agreement shall be binding upon and shall inure to the benefit of Chase and the Lender and their respective successors and assigns, and any purchaser at any foreclosure sale instituted pursuant to the Home Equity Mortgage or the New Mortgage.
4. This Agreement shall be construed in accordance with the laws of the State of Illinois.

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IN WITNESS WHEREOF, Chase has caused this Agreement to be executed by its duly authorized representative as of the day and year first above written.

WITNESS:

CHASE MANHATTAN BANK USA, N.A.

Wilma Rivera

By: HAROLD W. DRAKE

Name: HAROLD W. DRAKE

Title: MORTGAGE OFFICER CHASE
MANHATTAN BANK USA, N.A.

STATE OF NEW YORK, COUNTY OF MONROE, to wit:

I hereby certify that, on this 24th day of JANUARY, 2003, before the subscriber, a Notary Public of the aforesaid State, personally appeared HAROLD W. DRAKE, who acknowledged himself/herself to be the MORTGAGE OFFICER CHASE MANHATTAN BANK USA, N.A., a body corporate, and that he/she executed the foregoing Subordination Agreement for the purposes therein contained by signing the name of the said body corporate by himself/herself as MORTGAGE OFFICER CHASE MANHATTAN BANK USA, N.A..

STEPHEN ENDERLE
Notary Public, State of New York
Monroe County, Reg# 01EN6073378
Commission Expires April 22, 2006



Notary Public

My Commission Expires: Apr, 22, 2006

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LEGAL DESCRIPTION

02NL42624

LOT 22 AND THE SOUTH 1/2 OF LOT 23 IN BLOCK 4 IN ENGEL AND BECKER'S KENILWORTH AVENUE SUBDIVISION OF THE SOUTH 20 ACRES OF THE NORTH 30 ACRES OF THE NORTHWEST 1/4 OF SECTION 35, TOWNSHIP 41 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

RETURN TO (NLS):
NATIONS TITLE AGENCY INC.
5370 W. 95TH ST.
SHAWNEE, KS 66207



Property of Cook County Clerk's Office

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CITY OF CHICAGO

DEPARTMENT OF PUBLIC HEALTH

30240873

STATE OF ILLINOIS

STATE FILE
NUMBER

REGISTRATION
DISTRICT NO. **16-10**
REGISTERED
NUMBER

MEDICAL CERTIFICATE OF DEATH

DECEASED NAME K. Marshall		FIRST MIDDLE LAST Rubin	SEX 2. Male	DATE OF DEATH (MONTH, DAY, YEAR) NOV 13 2001
COUNTY OF DEATH Cook		AGE-LAST BIRTHDAY (MOS. YRS.) 59	UNDER 1 YEAR HOURS 56.	DATE OF BIRTH (MONTH, DAY, YEAR) December 29, 1941
CITY, TWP., OR ROAD DISTRICT NUMBER		HOSPITAL OR OTHER INSTITUTION NAME (IF NOT IN EITHER, GIVE STREET AND NUMBER)		
6a. Chicago		6b. Our Lady Of The Resurrection		
FOREIGN COUNTRY BIRTHPLACE (CITY AND STATE OR COUNTRY)		NAME OF SURVIVING SPOUSE (MATERIAL NAME IF WIFE) 8b. Lynn Feinzimer		
7. Chicago, IL SOCIAL SECURITY NUMBER		KIND OF BUSINESS OR INDUSTRY USUAL OCCUPATION		
10. 360-30-4251		EDUCATION (SPECIFY ONLY HIGHEST GRADE COMPLETED) Elementary School (6-12) 9. Yes College (14 & up) 4.		
13a. 7106 North Hamlin STATE ZIP CODE		CITY, TOWN, TWP., OR ROAD DISTRICT NO. 11a. Salesman 11b. Charity Lincolnwood		
13b. IL 13f. 60712		INSIDE CITY COUNTY 13c. White 14b. X NO 13d. COOK LAST MIDDLE		
FATHER-NAME FIRST		MOTHER-NAME FIRST MIDDLE 15. Harry Rubin		
INFORMANT'S NAME (TYPE OR PRINT) 17a. Lynn Rubin		RELATIONSHIP 17b. Wife		
		MAILING ADDRESS (STREET AND NO. OR RFD, CITY, STATE, ZIP) 17c. 7106 N. Hamlin, Lincolnwood, IL 60712		
18. PART I. Enter the diseases or complications that caused the death. Do not enter the mode of dying, such as cardiac or respiratory, etc.		APPROXIMATE TIME AND DATE BETWEEN DEATH AND DEATH 30 MIN		
Immediate Cause (Final resulting in death)		(a) DUE TO, OR AS A CONSEQUENCE OF (b) DUE TO, OR AS A CONSEQUENCE OF (c) DUE TO, OR AS A CONSEQUENCE OF		
18. PART II. Enter the diseases or complications contributing to death but not resulting in the underlying cause. Enter in Part I.		30 MIN		
DATE OF OPERATION, IF ANY		MAJOR FINDINGS OF OPERATION		
20a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, PLACE AND DUE TO THE CAUSE(S) STATED.		WAS CORONER OR MEDICAL EXAMINER NOTIFIED? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> 21a. TO THE BEST OF MY KNOWLEDGE, DEATH OCCURRED AT THE TIME, PLACE AND DUE TO THE CAUSE(S) STATED.		
22a. SIGNATURE NAME AND ADDRESS OF CERTIFIER NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER TYPE OR PRINT		WAS FEMALE? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF FEMALE, WAS THERE A PREGNANCY? IN LAST THREE MONTHS? 20c. YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> 19b. ILLINOIS LICENSE NUMBER NOTE: IF AN INJURY WAS INVOLVED IN THIS DEATH, THE CORONER OR MEDICAL EXAMINER MUST BE NOTIFIED.		
23. BURIAL, CREMATION, REMOVAL (SPECIFY) 24a. Burial		CEMETERY OR CREMATORIUM-NAME 24b. Westlawn Cemetery		
FUNERAL DIRECTOR'S SIGNATURE 25a. Lloyd Mandel Levayah Funerals		LOCATION CITY/TOWN STATE 24c. Chicago, IL STREET AND NUMBER OR RFD 25c. 031-009435 FUNERAL DIRECTOR'S SIGNATURE 25b. Rudolph Lerner		
ON		DATE (MONTH, DAY, YEAR) 24d. Nov. 13, 2001 25b. NOV 13 2001		
LOCAL REGISTRATION SIGNATURE 26a. ▶ John L. Wilhelm M.D.		DATE FILED BY (MONTH, DAY, YEAR) 26b. NOV 13 2001		

THIS CERTIFICATE COPY VALID WHEN
MULTICOLOR SIGNATURE SEAL IS
AFFIXED.

(BASED ON 1989 U.S. STANDARD CERTIFICATE)

Illinois Department of Public Health - Division of Vital Records

VR200 (Rev. 5/89)