

# UNOFFICIAL COPY

AFTER RECORDING, MAIL TO:

SATURN TITLE, LLC  
1030 W. HIGGINS RD.  
SUITE 365  
PARK RIDGE, IL 60068

1924339

143



Doc# 1927749093 Fee \$88.00

RHSP FEE:\$9.00 RPRF FEE: \$1.00

EDWARD M. MOODY

COOK COUNTY RECORDER OF DEEDS

DATE: 10/04/2019 11:01 AM PG: 1 OF 3

**SPECIAL NOTICE**  
This form is **NOT** required by law, nor the Cook County Recorder of Deeds (CCRD). CCRD employees **CANNOT** assist with the preparation of this, or **ANY LEGAL FORM.**

**PREPARED BY:**  
Stanley E. Goolish  
410 Blackhawk  
Schaumburg, IL 60193

## SURVIVING TENANT AFFIDAVIT

I, Thomas E. Coleman the surviving tenant of the tenancy created by the deed with the document number: 1225854009 do hereby declare under oath that the tenant Concetta M. Coleman died on 2/26/17 as evidenced by the attached certified copy of her/his death certificate (see attached).

I also declare that the aforementioned tenant was an owner of property with the following details:

### LEGAL DESCRIPTION

Lot 3 in block 71 in Norwood Park in Section 6, Township 40 North, Range 13, East of the third principal meridian in Cook County, Illinois.

### PROPERTY IDENTIFICATION NUMBER (PIN)

1 3 - 0 6 - 2 1 0 - 0 1 3 - 0 0 0 0

### COMMONLY KNOWN ADDRESS:

6246 N. Normandy  
Chicago, IL 60631

### NOTARY & AFFIANT SIGNATURE SECTION BELOW

Subscribed & Sworn to me by:

Stanley E. Goolish

Affiant Signature:

[Signature]

On the Following Date:

10/2/19

OFFICIAL SEAL  
STANLEY E GOOLISH  
NOTARY PUBLIC - STATE OF ILLINOIS  
MY COMMISSION EXPIRES:03/13/21

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## COOK COUNTY CLERK VITAL RECORDS CHICAGO, ILLINOIS MEDICAL CERTIFICATE OF DEATH

STATE FILE NUMBER 2017 0017917

DATE ISSUED 3/2/2017

|  |   |  |  |  |
|--|---|--|--|--|
| DECEDENT'S LEGAL NAME:<br>CONCETTA MARIE COLEMAN   |   |  | SEX<br>FEMALE  | DATE OF DEATH<br>FEBRUARY 26, 2017                                       |
| COUNTY OF DEATH<br>COOK  | AGE AT LAST BIRTHDAY<br>85 YEARS          | DATE OF BIRTH<br>JANUARY 01, 1932                      |  |  |
| CITY OR TOWN<br>CHICAGO  |   | HOSPITAL OR OTHER INSTITUTION NAME<br>NORWOOD CROSSING |  |  |
| PLACE OF DEATH<br>NURSING HOME / LONG TERM CARE FACILITY   |   |  |  |  |
| BIRTHPLACE<br>CHICAGO, IL  | SOCIAL SECURITY NUMBER                    | STATUS AT TIME OF DEATH<br>MARRIED                     | SURVIVING SPOUSE/CIVIL UNION PARTNER'S MAIDEN NAME<br>THOMAS EUGENE COLEMAN    | EVER IN U.S. ARMED FORCES? NO  |
| RESIDENCE<br>6246 N NORMANDY   | APT. NO.                                  | CITY OR TOWN<br>CHICAGO                                | INSIDE CITY LIMITS?<br>YES   |  |
| COUNTY<br>COOK   | STATE<br>IL                               | ZIP CODE<br>60631                                      | FATHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION<br>RALPH SPIZZIRRI | MOTHER/CO-PARENT'S NAME PRIOR TO FIRST MARRIAGE/CIVIL UNION<br>ANN PORRO |
| INFORMANT'S NAME<br>THOMAS EUGENE COLEMAN  |   | RELATIONSHIP<br>HUSBAND                                | MAILING ADDRESS<br>6246 N NORMANDY, CHICAGO, IL, 60631                         |  |
| METHOD OF DISPOSITION<br>CREMATION   | PLACE OF DISPOSITION<br>FOREST CREMATORY  | LOCATION - CITY OR TOWN AND STATE<br>ROMEOVILLE, IL    | DATE OF DISPOSITION<br>MARCH 03, 2017  |  |
| FUNERAL HOME<br>CREMATION SOCIETY OF ILLINOIS - EDISON PARK, 6471 NORTHWEST HIGHWAY, CHICAGO, IL, 60631  |   |  |  |  |
| FUNERAL DIRECTOR'S NAME<br>MICHAEL KLEMUNDT  |   |  | FUNERAL DIRECTOR'S ILLINOIS LICENSE NUMBER<br>034014296                        |  |
| LOCAL REGISTRAR'S NAME<br>DAVID ORR  |   |  | DATE FILED WITH LOCAL REGISTRAR<br>MARCH 2, 2017                               |  |
| <b>CAUSE OF DEATH</b> PART I: BRONCHOPNEUMONIA   |   |  |  |  |
| IMMEDIATE CAUSE<br><small>(Final disease or condition resulting in death)</small>  |   | Due to (or as a consequence of):                       |  | APPROXIMATE<br>INTERVAL BETWEEN<br>ONSET AND DEATH<br><br>2 DAYS         |
|  |   | 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 <i>significant conditions contributing to death</i> but not resulting in the underlying cause given in PART I:<br>ALZHEIMERS DEMENTIA OROPHARYNGEAL DYSPHAGIA |   |  | WAS AN AUTOPSY PERFORMED? NO   |  |
|  |   |  | WERE AUTOPSY FINDINGS USED TO COMPLETE CAUSE OF DEATH? N/A                     |  |
| FEMALE PREGNANCY STATUS:<br>NOT APPLICABLE   |   |  | MANNER OF DEATH:<br>NATURAL  |  |
| DATE OF INJURY   | TIME OF INJURY                            | PLACE OF INJURY  |  | INJURY AT WORK?  |
| LOCATION OF INJURY   |   |  |  |  |
| DESCRIBE HOW INJURY OCCURRED:  |   |  |  | IF TRANSPORTATION INJURY, SPECIFY:                                       |
| ATTEND THE DECEASED?<br>YES  | DATE LAST SEEN ALIVE<br>FEBRUARY 24, 2017 | WAS MEDICAL EXAMINER OR CORONER CONTACTED? NO          | DATE PRONOUNCED  | TIME OF DEATH<br>06:10 AM  |
| CERTIFIER<br>PHYSICIAN   |   |  | DATE CERTIFIED:<br>MARCH 01, 2017  |  |
| NAME, ADDRESS AND ZIP CODE OF PERSON COMPLETING CAUSE OF DEATH<br>COZZI, THOMAS, 1430 N ARLINGTON HEIGHTS RD, SUITE 112, ARLINGTON HEIGHTS, ILLINOIS, 60004                        |   |  |  | PHYSICIAN'S LICENSE NUMBER<br>036-062226                                 |

THE WORD VOID APPEARS WHEN PHOTOCOPIED

NOTE: EMBOSSED STATE AND COUNTY SEALS AT BOTTOM



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



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American Land Title Association

File Number : 1924339  
Commitment for Title Insurance  
Adopted 6-17-06 Revised 08-01-2016

## EXHIBIT A

**Legal:**

LOT 3 IN BLOCK 71 IN NORWOOD PARK IN SECTION 6, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK COUNTY, ILLINOIS.

**Address:** 6246 N. Normandy Ave., Chicago, IL 60631**PIN #:** 13-06-210-013-0000**PIN #:****PIN #:****Township:** Jefferson

*This page is only a part of a 2016 ALTA® Commitment for Title Insurance( issued by Old Republic National Title Insurance Company). This Commitment is not valid without the Notice; the Commitment to Issue Policy; the Commitment Conditions; Schedule A; Schedule B, Part I-Requirements; (and) Schedule B, Part II-Exceptions(; and a counter-signature by the Company or its issuing agent that may be in electronic form).*

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