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Doc#. 2025839208 Fee: \$55.00

Edward M. Moody

Cook County Recorder of Deeds
Date: 09/14/2020 02:56 PM Pg: 1 of 4

Prepared by and Recorded at the request of and to be returned to: PAUL DAVIS EMERGENCY SERVICES 1700 TODD FARM DRIVE ELGIN, ILLINOIS 60123

ORIGINAL CONTRACTOR'S CLAIM FOR LIEN

State of Illinois SS. County of COOK

The Claimant, PAUL DAVIS EMERGENCY SERVICES, 1 100 TODD FARM DRIVE, ELGIN, ILLINOIS 60123, hereby files its claim for lien as an Original Contractor against

OWNER:

MATILDA MONTALVO AKA MATILDA MONTALVO LUGO, 2235 N. KIMBALL AVENUE, CHICAGO, IL 60647

if any, (hereinafter, collectively 'Owner'), and any other person claiming an interest in the real estate hereinafter described, by, through or under the Owner and further states:

On 02/21/2020 through 04/01/2020, Owner owned in fee simple title to the certain land described as follows: 2235 N. KIMBALL AVENUE, CHICAGO, including all land and improvements thereon, in the County of COOK, State of Illinois.

Permanent Index Numbers: 13-35-215-013-0000

Common Address: 2235 N. KIMBALL AVENUE, CHICAGO, ILLINOIS 60647

Legal Description: LOT 10 IN BLOCK 4 IN SHIPMAN, BILL AND MERRILL'S SUBDIVISION OF THE EAST 1/2 OF THE NORTHEAST 1/4 OF SECTION 35, TOWNSHIP 40 NORTH, RANGE 13, EAST OF THE THIRD PRINCIPAL MERIDIAN, IN COOK

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COUNTY, ILLINOIS.

On 02/20/2020, the claimant made a contract with MATILDA MONTALVO LUGO, 2235 N. KIMBALL AVENUE, CHICAGO, IL 60647, to supply materials and labor for:

MITIGATION (See Contract attached hereto).

That at the spenial instance and request of Owner, the Claimant furnished extra and additional materials at and extra and additional labor on said premises of the value of: \$0.00.

The Contract was entered into by Claimant, and the work performed there under was performed with the knowledge, authorization and consent of the Owner or the Owner knowingly permitted said work to be performed by Commant.

The Owner is entitled to credits on account thereof as follows: \$0.00 leaving due, unpaid and owing to the Claimant, after allowing all credits, the sum of \$42,744.83 for which, with interest, the claimant claims a lien on said land and all improvements thereon.

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	Dated: 7/20/20							
	PAUL DAVIS EMERGENCY SERVICES							
	By:WAYNEMERLINO, OWNER							
	VERIFICATION							
	WAYNE WELLINO, the OWNER of PAUL DAVIS EMERGENCY SERVICES, being of lawful age and upon being duly upon oath, states and verifies as follows: that he/she has read the foregoing Ciein of Lien and understands the contents thereof; that the matters and things							
	contained therein are true and correct to the best of his/her knowledge, information and belief.							
_	WAYNEMERLINO							
	STATE OF Illivois							
	COUNTY OF KANE							
	I CERTIFY that on this							
	Directors executed the within instrument on its behalf, and thereupor acknowledged that claimant signed, sealed and delivered same as claimant's act and deed, for the purposes herein							
	expressed. OFFICIAL SEAL (Netary Public) OFFICIAL SEAL KEITH A. WHITE Notary Public - State of Illinois My Commission Expires 10/23/2020							
	(the state of the							

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		AVIS	W	ORK A	LITH	ORE	7ΔΤΙ	ON			
RECOVER • RE		RUCT • RESTORE	- H		70 202			439 B #1			
			F		Car	30=1					
Customer Name Customer	Matilda N	nontaivo imball Ave.	Email:		Claim Num						
Address	Chicago, I			-	Categ						
Phone:	Home:	7733437882	Cell:		C	ass:	Date:	02/20/2020			
		<u></u>									
l, the undersigned property owner and or manager hereby authorize Paul Davis Emergency Services ("Contractor") to make any and all necessary											
emergency repairs in the form of: Water Mitigation due to: Water damage to my property											
ocated at: 2235 N Kimball Ave, Chicago, IL 60647 the ("Property").											
			•								
l acknowledge that I ar responsible for all of the costs for these emergency repairs. I also acknowledge that emergency repairs do not carry any											
guarantees and or warrantics.											
If such repairs are covered under my insurance with: Insurance, ("my insurance Company"), then I hereby authorize											
If such repairs are covered under the further insurance, ("my insurance Company"), then I hereby authorize my insurance company to pay continuous directly for such services and or repairs upon my execution of the Completion Certificate below. I further											
request that no deductible shall be withhold from any such payment as I will pay any and all deductible(s) directly to my insurance company. Please											
pay Contractor direct all monies due for this work with no deductions. We understand that if there is a pack out or any items taken for contents work											
or storage all outstanding amounts due to Paul Davis and t be paid in full prior to any items being returned.											
I hereby represent t	hat I have	all necessary power a	nd o auti ority to execu	te this Authorizat	ion as a legally	binding ins	trument.				
	<u> </u>	T				D-4		2/20/2020			
Property Owner / F	Vlanager:		Matiloa (un atalvo			Date:		2/20/2020 			
In all a Merit che Lugo											
			* Please sign a	bove in box *							
Paul Davis Emergenc	y Services:		(A) Oscar Roque			Date:	0	2/20/2020			
			95	>	0	75					
			* Please sign a	bove in box *	·	(
COMPLETION CERTIFICATE											
The Contractor has co	ompleted al	I authorized necessary r	epairs and emergency wor	k. I hereby direct π	ny Insurance Co	npany to pay	Contractor c	reudy			
		on of work performed is						 			
			<u>-</u>								
Property Owner / I	Manager:		Matilda Montalvo			Date:					
		,_ 1									
west											
* Please sign above in box *											
649 S. Vermont Street, Palatine, Illinois 60067 Office (224) 333-1300 Fax (847) 241-0172 www.PDES24hr.com 24 HR EMERGENCY HOTLINE: (800) 408-3290											