SWORN OWNER'S STATEMENT

Escrow #: _____

The affiant, _____ (Name), being first duly sworn, on oath deposes and says that he/she is/are the owner(s) of the following described premises in the County of _____, State of Indiana, commonly known as _____ (Street Address)

1. That the affiant is thoroughly familiar with all the facts and circumstances concerning the premises described above;
2. That with respect to improvements on the premises, all contracts let for work done or material furnished to date or for the furnishing of future work or materials relative to the contemplated improvements are listed below;
3. That this statement is a full, true and complete statement of all such contracts, previous payments and balances due, if any.

NAME AND ADDRESS of Contractor/Subcontractor	KIND OF WORK OR MATERIAL	ADJUSTED TOTAL CONTRACT (INC. EXTRAS & CREDITS)	AMOUNT PREVIOUSLY PAID	AMOUNT OF THIS PAYMENT	BALANCE TO BECOME DUE
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
					$0.00
TOTAL		**$0.00**	**$0.00**	**$0.00**	**$0.00**

THE UNDERSIGNED HEREBY APPROVES THE ABOVE AMOUNTS FOR PAYMENT.

General Contractor Company Name: _____

Signed: _____

Printed Name: _____

State of: _____**:**
County of: _____**:**

Subscribed and Sworn before me this _____ day of _____. _____.

_____ Commision Expiration:
Notary Public: County of Residence: