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STATE OF ALABAMA)

SHELBY COUNTY)

STATEMENT OF LIEN OF THE NORTH SHELBY COUNTY FIRE AND EMERGENCY MEDICAL DISTRICT

The North Shelby County Fire and Emergency Medical District, a public corporation, files this statement in writing, verified by oath of Guy R. Sipe, an employee or officer of the District, who has personal knowledge of the facts herein set forth:

That said North Shelby County Fire and Emergency Medical District, pursuant to Act 99-245 of the 1999 Regular Session of the Alabama Legislature, claims a lien on the following property, situated in Shelby County, Alabama, to-wit:

Parcel: 10 2 09 0 001 001.135

Address: 495 HEATHERWOOD DRIVE BIRMINGHAM AL 35244

Legal Description: Lot#:12 Book:9 Pg:161 Sub: HEATHERWOOD 4TH SECTOR

This lien is claimed, separately and severally, as to both the buildings and improvements thereon, and the said land.

That the said lien is claimed to secure an indebtedness of four hundred thirty dollars and fourteen cents (\$430.14), due to the North Shelby County Fire and Emergency Medical District for fire services for the fiscal years of 2022/23. The District further claims reasonable attorney's fees and claims an additional indebtedness representing the cost of recording this lien.

The record owner(s) or proprietor(s) of the aforementioned Parcel or Property is: DEDRICK L AGEE & STEPHANIE Y AGEE

North Shelby Fire and mergency Medical District

This Instrument Prepared By: Guy R. Sipe, Fire Chief 4617 Valleydale Road Birmingham, Alabama 35242

Date: 04/05/2023



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STATE OF ALABAMA)

SHELBY COUNTY)

I, the undersigned, a notary Public in and for said County in the State, hereby certify that Guy R. Sipe, an employee or officer of the North Shelby County Fire and Emergency Medical District, whose name is signed to the foregoing Lien, and who is known to me, acknowledged before me on this day that, being informed of the contents of the above and foregoing Lien, in such capacity for the said District, executed the same voluntarily on the date the same bears date.

Given under my hand and official seal of office this the $\frac{2}{2}$ 2023.

__ day of ______

Notary Public

Glenda Dunham Jones My Commission Expires 12/5/2023

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