| STATE OF INDIANA) | SS: | BOONE SUPERIOR COURT II SMALL CLAIMS COURT DIVISION |
|--|---------------------------------------|--|
| COUNTY OF BOONE) | | CAUSE NUMBER |
| | | |
| | | |
| Plaintiff(s) | , | |
| V. | | |
| | | |
| Defendant(s) | | |
| · , | | |
| | | |
| PROPERTY STATUS CERTIFICATION AFFIDAVIT | | |
| that is the annual in the CO | , the ow | ner/property manager of the real estate |
| that is the subject of this ejectr | | |
| (hereinafter "Property"), or, as the case may be, the attorney representing said owner/property manager, states that the Property is not subject to an FHA-insured | | |
| mortgage. | is that the Property | / is not subject to an FHA-insured |
| Laffirm and verify unde | the penalties for | perjury, that the foregoing |
| representations are true and co | prrect to the best o | f my knowledge and belief. |
| | | |
| Owner/Property Manager/Attor | nev | Date of Signature |
| | , , , , , , , , , , , , , , , , , , , | Pate of Signature |
| Name Printed | | |