**Joinder and Consent of Easement Holder to Granting of Environmental Restrictive Covenant**

[*EASEMENT HOLDER NAME*], whose mailing address is [*MAILING ADDRESS*] (hereinafter “Easement Holder”), as the holder of the following described instrument: Easement by and between [*PARTY NAMES*] dated [*INSERT DATE*] and recorded [*DATE RECORDED*], in Official Records Book [*BOOK NUMBER*], at page [NUMBER], in the Public Records of [*COUNTY*] County, Indiana, the “easement”, hereby certifies that it is the holder of that certain easement which encumbers the property described on Exhibit “A” attached hereto and incorporated herein, owned by [*OWNER*] (hereinafter “Owner”). The Easement Holder hereby joins in and consents to the granting of the Environmental Restrictive Covenant [If ERC was previously recorded, insert: dated [INSERT DATE] and recorded [DATE RECORDED], in Official Records Book [BOOK NUMBER], at page [NUMBER] or [INSTRUMENT NO], in the Public Records of [COUNTY] County, Indiana] by the Owner to the Indiana Department of Environmental Management. [This Joinder and Consent should be filed along with the ERC as an exhibit when possible.] [If ERC has been previously recorded, this Joinder and Consent can be recorded as a stand-alone document.]

IN WITNESS WHEREOF, the undersigned has executed and delivered this Consent and Joinder this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_.

[NAME OF EASEMENT HOLDER, STATE OF INCORPORATION IF ENTITY]

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

STATE OF )

) SS:

COUNTY OF )

Before me, the undersigned, a Notary Public in and for said County and State, personally appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of the Easement Holder, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, who acknowledged the execution of the subordination for and on behalf of said entity.

Witness my hand and Notarial Seal this \_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_.

, Notary Public

Residing in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ County, \_\_\_\_\_\_\_\_

My Commission Expires:

This instrument prepared by:

*[insert name and address]*

**I affirm, under the penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law:**

*[insert name and address]*