

| | PRINTED NAME | |
|---|--|--|
| SIGN AND DELIVER | BY:OWNER | |
| DNALLY KNOWN TO ME TIFICATE, APPEARED | PRINTED NAME | |
| | BY:OWNER | |
| ND FOR THE COUNTY | DATED THIS DAY OF | |
| | SCHOOL DISTRICT CERTIFICATE THE LOTS CONTAINED IN THIS SUBDIVISION FALL W OF ELEMENTARY SCHOOL DISTRICT 97 AND HIGH SCH | |
| | | |
| | PROFESSIONAL ENGINEER | _ |
| | OWNER OR ATTORNEY | _ |
| | OWNER OR ATTORNEY | _ |
| THE SUBDIVISION | DATED THIS DAY OF , A.D. 20 |) |
| , AS MORTGAGEE, IN THE RECORDER'S , A.D. 20, | TO THE BEST OF OUR KNOWLEDGE AND BELIEF, THE NOT BE CHANGED BY THE CONSTRUCTION OF SUCH A OR THAT IF SUCH SURFACE WATER DRAINAGE WILL F BEEN MADE FOR COLLECTION AND DIVERSION OF SUC OR DRAINS WHICH THE SUBDIVIDER HAS A RIGHT TO WILL BE PLANNED FOR IN ACCORDANCE WITH GENERA SO AS TO REDUCE THE LIKELIHOOD OF DAMAGE TO THE CONSTRUCTION OF THE ANNEXED PLAT. | NNEXED PLATS OR ANY PART THEREOF; BE CHANGED, REASONABLE PROVISION HAS CH SURFACE WATERS INTO PUBLIC AREAS USE; AND THAT SUCH SURFACE WATERS ALLY ACCEPTED ENGINEERING PRACTICES |
| | DRAINAGE CERTIFICATE STATE OF ILLINOIS)) SS COUNTY OF COOK) | |
| | PRINTED NAME | |
| | NOTARY | |
| HOSE NAME IS SUBSCRIBED IE USES AND PURPOSES | TO THE FORGOING INSTRUMENT AS A FREE AND VOL THEREIN SET FORTH IN THE AFORESAID INSTRUMENT GIVEN UNDER MY HAND AND NOTORIAL SEAL THIS DAY OF | JNTARY ACT OF THE USES AND PURPOSES |
| IN AND FOR THE AFORESAID IRE OF THE OWNER'S HOSE NAME IS SUBSCRIBED | I, County and state, do hereby certify that the certificate is personally know to me to be th | HE SAME PERSON WHOSE NAME IS SUBSCRIBED |
| | NOTARY_CERTIFICATE STATE_OF) COUNTY_OF) SS | |
| | | |
| | | |
| | ATTEST ADDRESS: | |
| | PRINTED NAME | |
| | SIGNATURE | |
| | EASEMENTS AND RIGHT-OF-WAY DEPICTED HEREON THIS DAY OF | |
| , AM THE RECORD E AFFIXED HERON, AND DO | COUNTY OF) THIS IS TO CERTIFY THAT ALBION RESIDENTIAL LLC DESCRIBED IN THE SURVEYOR'S CERTIFICATE AFFIXE SUBDIVISION OF SAID PROPERTY, AND THE VARIOUS | IS THE RECORD OWNER OF THE PROPERTY D HERON, AND DOES HEREBY CONSENT TO THE |
| | STATE OF) SS COUNTY OF) | |
| | OWNER'S CERTIFICATE | |