NELSON SURVEYORS, LLC
418 S. CASS AVENUE
WESTMONT, ILLINOIS 60559
NELSONSURVEYORS@LLC.COM
(815) 436-8526 OFFICE
(815) 436-8538 FAX

PREPARED FOR:
ENSURE PROPERTIES
P.O. BOX 24
PLAINFIELD, ILLINOIS 60544
815 557-0600

BABCOCK'S SUBDIVISION

A SUBDIVISION OF THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2 TOWNSHIP 35 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, IN WILL COUNTY, ILLINOIS.

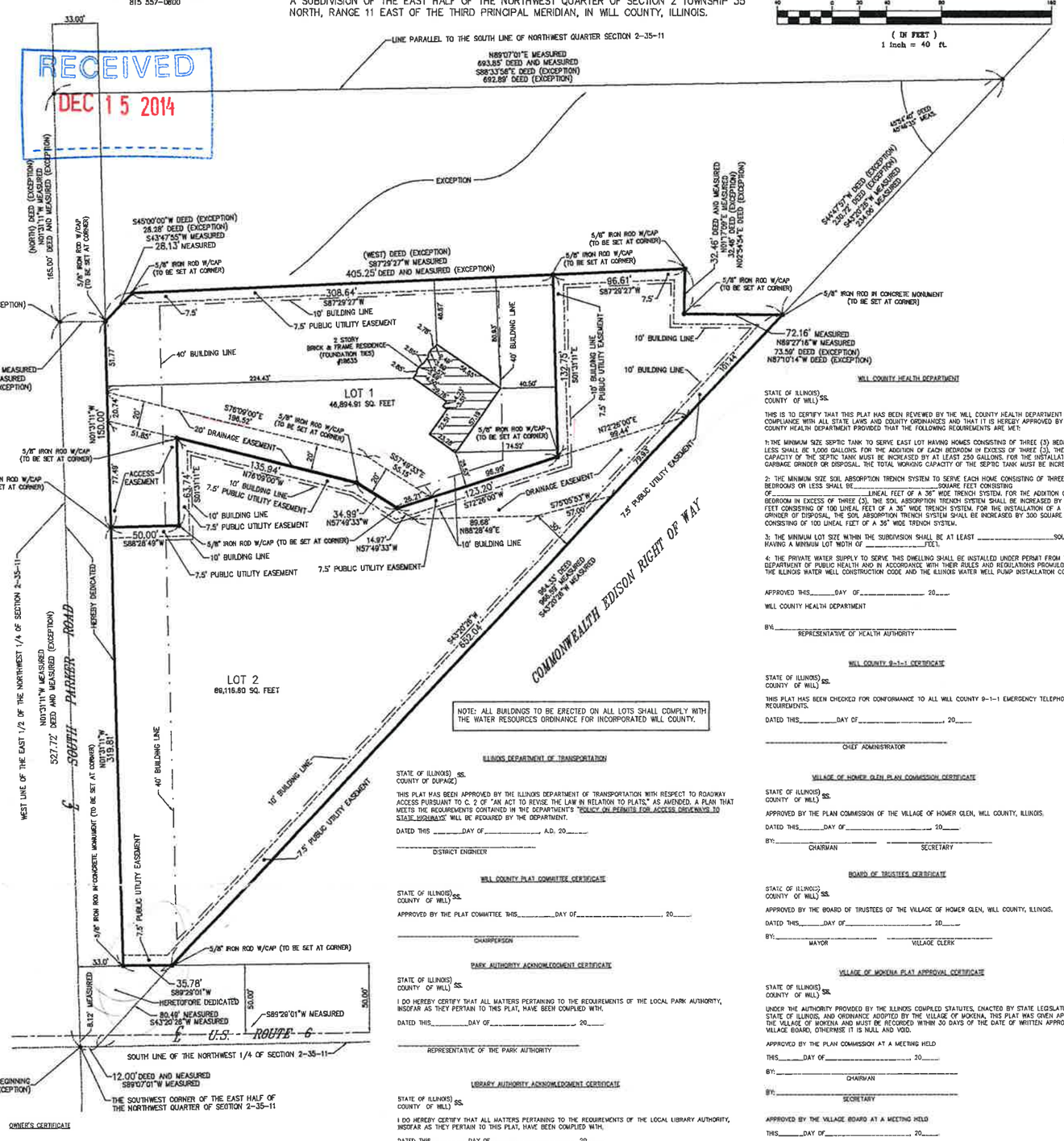
PIN: 15-08-02-100-039-0000

GRAPHIC SCALE

40 0 20 40 80 160

(IN FEET)
1 inch = 40 ft.

RECEIVED
DEC 15 2014



NOTE: ALL BUILDINGS TO BE ERECTED ON ALL LOTS SHALL COMPLY WITH THE WATER RESOURCES ORDINANCE FOR INCORPORATED WILL COUNTY.

OWNER'S CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

THIS IS TO CERTIFY THAT THE UNDERSIGNED, PARKER ROAD, L.L.C., A LIMITED LIABILITY COMPANY IS THE SOLE OWNER OF RECORD OF THE FOLLOWING DESCRIBED LAND, AND HAS CAUSED THE SAME TO BE SURVEYED AND SUBDIVIDED, AS SHOWN ON THIS PLAT OF SUBDIVISION, FOR THE USES AND PURPOSES THEREIN SET FORTH, AND DOES HEREBY ACKNOWLEDGE AND ADOPT THE SAME UNDER THE STYLE AND TITLE THEREON INDICATED:

THE UNDERSIGNED FURTHER CERTIFIES THAT, TO THE BEST OF THEIR KNOWLEDGE, THE PARCEL DESCRIBED HEREON LIES WITHIN NEW LENOX GRADE SCHOOL DISTRICT 122 AND IN LINCOLN-WAY HIGH SCHOOL DISTRICT 210.

DATED THIS_____DAY OF _____, 20____.

BY:_____
MANAGER

ATTEST:_____
MEMBER

NOTARY PUBLIC CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I,_____, A NOTARY PUBLIC IN AND FOR SAID COUNTY, IN THE STATE AFORESAID, DO HEREBY CERTIFY THAT _____ AND _____ RESPECTIVELY, THE MANAGER AND MEMBER, OF PARKER ROAD, L.L.C., PERSONALLY KNOWN TO ME TO BE THE SAME PERSONS WHOSE NAMES ARE SUBSCRIBED TO THIS SUBDIVISION PLAT AS OWNERS, AS SUCH MANAGER AND MEMBER, RESPECTIVELY, APPEARED BEFORE ME THIS DAY IN PERSON AND ACKNOWLEDGED THAT THEY SIGNED THIS SUBDIVISION PLAT AS THE FREE AND VOLUNTARY ACT, AND AS THE FREE AND VOLUNTARY ACT OF SAID PARKER ROAD, L.L.C., FOR THE USES AND PURPOSES THEREIN SET FORTH.

GIVEN UNDER MY HAND AND SEAL THIS_____DAY OF _____, 20____.

_____
NOTARY PUBLIC

MY COMMISSION EXPIRES:_____

ROAD DISTRICT CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

APPROVED THIS_____DAY OF _____, 20____.

BY:_____
ROAD DISTRICT COMMISSIONER

COUNTY HIGHWAY CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

APPROVED THIS_____DAY OF _____, 20____.

AS TO ROADWAY ACCESS TO COUNTY HIGHWAY_____

ALSO KNOWN AS_____

_____
WILL COUNTY ENGINEER

EASEMENT PROVISIONS

AN EASEMENT FOR SERVING THE SUBDIVISION AND OTHER PROPERTY IS HEREBY RESERVED FOR AND GRANTED TO NORTHERN ILLINOIS GAS COMPANY, ITS THEIR RESPECTIVE SUCCESSORS AND ASSIGNS, IN ALL PLATTED "EASEMENT" AREAS, STREETS, ALLEYS, OTHER PUBLIC WAYS AND PLACES SHOWN ON THIS PLAT, SAID EASEMENT TO BE FOR THE INSTALLATION, MAINTENCE, RELOCATION, RENEWAL AND REMOVAL OF GAS MAINS AND APPURTENANCES FOR THE PURPOSE OF SERVING ALL AREA SHOWN ON THIS PLAT AS WELL AS OTHER PROPERTY, WHETHER OR NOT CONTIGUOUS THERETO, NO BUILDING OR OTHER STRUCTURES SHALL BE CONSTRUCTED OR ERECTED IN ANY SUCH "EASEMENT" AREAS, STREET, ALLEYS, OR OTHER PUBLIC WAYS OR PLACES NOT SHALL ANY OTHER USE BE MADE THEREOF WHICH WILL INTERFERE WITH THE EASEMENTS RESERVED AND GRANTED HEREBY.

AND EASEMENT FOR SERVING THE SUBDIVISION AND OTHER PROPERTY WITH ELECTRIC AND COMMUNICATION SERVICE HEREBY RESERVED FOR AND GRANTED TO COMMONWEALTH EDISON COMPANY, AT & T, AND COMCAST CABLE, GRANTEES, THEIR RESPECTIVE SUCCESSORS AND ASSIGNS, JOINTLY AND SEVERALLY, TO INSTALL, OPERATE, AND MAINTAIN AND REMOVE, FROM TIME-TO-TIME, FACILITIES USED IN CONNECTION WITH OVERHEAD AND UNDERGROUND TRANSMISSION AND DISTRIBUTION OF ELECTRICITY AND SOUNDS AND SIGNALS IN, OVER, UNDER, ACROSS, ALONG AND UPON THE SURFACE OF THE PROPERTY SHOWN WITHIN THE DASHED LINES ON THE PLAT FOR STREETS, ALLEY, TOGETHER WITH THE RIGHT TO INSTALL REQUIRED SERVICE CONNECTIONS OVER OR UNDER THE SURFACE OF EACH TO SERVE IMPROVEMENTS THEREON, THE RIGHT TO OVERHANG ALL LOTS, AERIAL SERVICES WIRES TO SERVE ADJACENT LOTS, THE RIGHT TO CUT, TRIM OR REMOVE TREES, BUSHES AND ROOTS AS MAY BE REASONABLY REQUIRED INCIDENT TO THE RIGHTS HEREIN GIVEN, AND THE RIGHT TO ENTER UPON THE SUBDIVISION PROPERTY FOR ALL SUCH PURPOSES. OBSTRUCTIONS SHALL NOT BE PLACED OVER GRANTEES' FACILITIES OR IN, UPON OR OVER THE PROPERTY WITHIN DASHED LINES MARKED "EASEMENT" WITHOUT PRIOR WRITTEN CONSENT OF GRANTEES. AFTER INSTALLATION OF ANY SUCH FACILITIES, THE GRADE OF THE SUBDIVIDED PROPERTY SHALL NOT BE ALTERED IN A MANNER SO AS TO INTERFERE WITH THE PROPER OPERATION AND MAINTENCE THEREOF.

ILLINOIS DEPARTMENT OF TRANSPORTATION

STATE OF ILLINOIS) SS.
COUNTY OF DUPAGE)

THIS PLAT HAS BEEN APPROVED BY THE ILLINOIS DEPARTMENT OF TRANSPORTATION WITH RESPECT TO ROADWAY ACCESS PURSUANT TO C. 2 OF "AN ACT TO REVISE THE LAW IN RELATION TO PLATS" AS AMENDED. A PLAN THAT MEETS THE REQUIREMENTS CONTAINED IN THE DEPARTMENT'S "POLICY ON PERMITS FOR ACCESS DRIVEWAYS TO STATE HIGHWAYS" WILL BE REQUIRED BY THE DEPARTMENT.

DATED THIS _____DAY OF_____, A.D. 20____.

_____
DISTRICT ENGINEER

WILL COUNTY PLAT COMMITTEE CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

APPROVED BY THE PLAT COMMITTEE THIS_____DAY OF_____, 20____.

_____
CHAIRPERSON

PARK AUTHORITY ACKNOWLEDGMENT CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I DO HEREBY CERTIFY THAT ALL MATTERS PERTAINING TO THE REQUIREMENTS OF THE LOCAL PARK AUTHORITY, INSOFAR AS THEY PERTAIN TO THIS PLAT, HAVE BEEN COMPLIED WITH.

DATED THIS_____DAY OF_____, 20____.

_____
REPRESENTATIVE OF THE PARK AUTHORITY

LIBRARY AUTHORITY ACKNOWLEDGMENT CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I DO HEREBY CERTIFY THAT ALL MATTERS PERTAINING TO THE REQUIREMENTS OF THE LOCAL LIBRARY AUTHORITY, INSOFAR AS THEY PERTAIN TO THIS PLAT, HAVE BEEN COMPLIED WITH.

DATED THIS_____DAY OF_____, 20____.

_____
REPRESENTATIVE OF THE LIBRARY AUTHORITY

WILL COUNTY DIRECTOR OF TAX MAPPING AND PLATTING CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I, _____, DIRECTOR OF TAX MAPPING AND PLATTING OFFICE DO HEREBY CERTIFY THAT I HAVE CHECKED THE PROPERTY DESCRIPTION ON THE PLAT AGAINST AVAILABLE COUNTY RECORDS AND FIND SAID DESCRIPTION TO BE TRUE AND CORRECT. THE PROPERTY HEREIN DESCRIBED IS LOCATED ON TAX MAP PAGE 03-024-E AND IDENTIFIED AS PERMANENT REAL ESTATE TAX INDEX # 15-08-02-100-039-0000 AND IDENTIFIED AS PERMANENT REAL ESTATE INDEX NUMBER (PIN) 15-08-02-100-039-0000.

DATED THIS_____DAY OF_____, 20____.

BY:_____
WILL COUNTY DIRECTOR OF TAX MAPPING AND PLATTING

WILL COUNTY SCHOOL SITE CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I DO HEREBY CERTIFY THAT ALL MATTERS PERTAINING TO THE REQUIREMENTS AS PRESCRIBED IN THE WILL COUNTY SCHOOL SITE CONTRIBUTION ORDINANCE, INSOFAR AS THEY PERTAIN TO THIS PLAT, HAVE BEEN COMPLIED WITH.

DATED THIS_____DAY OF_____, 20____.

_____
REGIONAL SUPERINTENDENT OF THE WILL COUNTY SCHOOLS

WILL COUNTY BUILDING AND ZONING CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I DO HEREBY CERTIFY THAT I HAVE RECEIVED PAYMENT OF THE FEES REQUIRED UNDER THE SUBDIVISION AND PLAT ORDINANCE OF WILL COUNTY, ILLINOIS.

DATED THIS_____DAY OF_____, 20____.

BY:_____
WILL COUNTY ZONING AND BUILDING CODE OFFICER

CHIEF SUBDIVISION ENGINEER CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I, _____, DO HEREBY CERTIFY THAT ALL MATTERS PERTAINING TO THE REQUIREMENTS AS PRESCRIBED IN THE REGULATIONS GOVERNING PLATS ADOPTED BY THE COUNTY BOARD OF WILL COUNTY INSOFAR AS THERY PERTAIN TO THE ANNEXED PLAT, HAVE BEEN COMPLIED WITH PUBLIC WORKS APPROVED THIS_____DAY OF_____, 20____.

BY:_____
CHIEF SUBDIVISION ENGINEER

WILL COUNTY CLERK CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

I, _____, COUNTY CLERK OF WILL COUNTY, ILLINOIS, DO HEREBY CERTIFY THAT THERE ARE NO DELINQUENT GENERAL TAXES, NO UNPAID CURRENT GENERAL TAXES, NO UNPAID FORFEITED TAXES AND NO REDEEMABLE TAX SALES AGAINST ANY OF THE LAND INCLUDED IN THE PLAT THEREON DRAWN. I FURTHER CERTIFY THAT I HAVE RECEIVED STATUTORY FEES IN CONNECTION WITH THE PLAT HEREON DRAWN.

GIVEN UNDER MY HAND AND SEAL OF THE COUNTY COURT AT_____, ILLINOIS, THIS ____DAY OF_____, 19____.

_____
WILL COUNTY CLERK

WILL COUNTY RECORDER'S CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

THIS INSTRUMENT NO._____ WAS FILED FOR RECORD IN THE RECORDER'S OFFICE AT WILL COUNTY, ILLINOIS ON THE _____DAY OF _____, 19____, AT _____O'CLOCK ___M. AND WAS RECORDED IN BOOK _____OF PLATS ON PAGE _____.

_____
WILL COUNTY RECORDER

WILL COUNTY HEALTH DEPARTMENT

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

THIS IS TO CERTIFY THAT THIS PLAT HAS BEEN REVIEWED BY THE WILL COUNTY HEALTH DEPARTMENT REGARDING COMPLIANCE WITH ALL STATE LAWS AND COUNTY ORDINANCES AND THAT IT IS HEREBY APPROVED BY THE WILL COUNTY HEALTH DEPARTMENT PROVIDED THAT THE FOLLOWING REQUIREMENTS ARE MET:

1: THE MINIMUM SIZE SEPTIC TANK TO SERVE EAST LOT HAVING HOMES CONSISTING OF THREE (3) BEDROOMS OR LESS SHALL BE 1,000 GALLONS. FOR THE ADDITION OF EACH BEDROOM IN EXCESS OF THREE (3), THE WORKING CAPACITY OF THE SEPTIC TANK MUST BE INCREASED BY AT LEAST 250 GALLONS. FOR THE INSTALLATION OF A GARBAGE GRINDER OR DISPOSAL, THE TOTAL WORKING CAPACITY OF THE SEPTIC TANK MUST BE INCREASED BY 50%.

2: THE MINIMUM SIZE SOIL ABSORPTION TRENCH SYSTEM TO SERVE EACH HOME CONSISTING OF THREE (3) BEDROOMS OR LESS SHALL BE_____SQUARE FEET CONSISTING OF_____LINEAL FEET OF A 36" WIDE TRENCH SYSTEM. FOR THE ADDITION OF EACH BEDROOM IN EXCESS OF THREE (3), THE SOIL ABSORPTION TRENCH SYSTEM SHALL BE INCREASED BY 300 SQUARE FEET CONSISTING OF 100 LINEAL FEET OF A 36" WIDE TRENCH SYSTEM. FOR THE INSTALLATION OF A GARBAGE GRINDER OR DISPOSAL, THE SOIL ABSORPTION TRENCH SYSTEM SHALL BE INCREASED BY 300 SQUARE FEET CONSISTING OF 100 LINEAL FEET OF A 36" WIDE TRENCH SYSTEM.

3: THE MINIMUM LOT SIZE WITHIN THE SUBDIVISION SHALL BE AT LEAST _____SQUARE FEET, HAVING A MINIMUM LOT WIDTH OF _____FEET.

4: THE PRIVATE WATER SUPPLY TO SERVE THIS DWELLING SHALL BE INSTALLED UNDER PERMIT FROM THE ILLINOIS DEPARTMENT OF PUBLIC HEALTH AND IN ACCORDANCE WITH THEIR RULES AND REGULATIONS PROMULGATED UNDER THE ILLINOIS WATER WELL CONSTRUCTION CODE AND THE ILLINOIS WATER WELL PUMP INSTALLATION CODE.

APPROVED THIS_____DAY OF_____ 20____.

WILL COUNTY HEALTH DEPARTMENT

BY:_____
REPRESENTATIVE OF HEALTH AUTHORITY

WILL COUNTY 9-1-1 CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

THIS PLAT HAS BEEN CHECKED FOR CONFORMANCE TO ALL WILL COUNTY 9-1-1 EMERGENCY TELEPHONE SYSTEM REQUIREMENTS.

DATED THIS_____DAY OF_____, 20____.

_____
CHIEF ADMINISTRATOR

VILLAGE OF HOMER GLEN PLAN COMMISSION CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

APPROVED BY THE PLAN COMMISSION OF THE VILLAGE OF HOMER GLEN, WILL COUNTY, ILLINOIS.

DATED THIS_____DAY OF_____, 20____.

BY:_____ _____
CHAIRMAN SECRETARY

BOARD OF TRUSTEES CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

APPROVED BY THE BOARD OF TRUSTEES OF THE VILLAGE OF HOMER GLEN, WILL COUNTY, ILLINOIS.

DATED THIS_____DAY OF_____, 20____.

BY:_____ _____
MAYOR VILLAGE CLERK

VILLAGE OF MOKENA PLAT APPROVAL CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

UNDER THE AUTHORITY PROVIDED BY THE ILLINOIS COMPILED STATUTES, ENACTED BY STATE LEGISLATURE OF THE STATE OF ILLINOIS, AND ORDINANCE ADOPTED BY THE VILLAGE OF MOKENA, THIS PLAT WAS GIVEN APPROVAL BY THE VILLAGE OF MOKENA AND MUST BE RECORDED WITHIN 30 DAYS OF THE DATE OF WRITTEN APPROVAL BY THE VILLAGE BOARD, OTHERWISE IT IS NULL AND VOID.

APPROVED BY THE PLAN COMMISSION AT A MEETING HELD

THIS_____DAY OF_____, 20____.

BY:_____
CHAIRMAN

BY:_____
SECRETARY

APPROVED BY THE VILLAGE BOARD AT A MEETING HELD

THIS_____DAY OF_____, 20____.

BY:_____
MAYOR

BY:_____
VILLAGE CLERK

VILLAGE OF NEW LENOX PLAT APPROVAL CERTIFICATE

STATE OF ILLINOIS) SS.
COUNTY OF WILL)

UNDER THE AUTHORITY PROVIDED BY THE ILLINOIS COMPILED STATUTES, ENACTED BY STATE LEGISLATURE OF THE STATE OF ILLINOIS, AND ORDINANCE ADOPTED BY THE VILLAGE OF NEW LENOX, THIS PLAT WAS GIVEN APPROVAL BY THE VILLAGE OF NEW LENOX AND MUST BE RECORDED WITHIN 30 DAYS OF THE DATE OF WRITTEN APPROVAL BY THE VILLAGE BOARD, OTHERWISE IT IS NULL AND VOID.

APPROVED BY THE PLAN COMMISSION AT A MEETING HELD

THIS_____DAY OF_____, 20____.

BY:_____
CHAIRMAN

BY:_____
SECRETARY

APPROVED BY THE VILLAGE BOARD AT A MEETING HELD

THIS_____DAY OF_____, 20____.

BY:_____
MAYOR

BY:_____
VILLAGE CLERK

SURVEYOR'S CERTIFICATE

STATE OF ILLINOIS)
COUNTY OF DUPAGE) SS.

THIS IS TO CERTIFY THAT I, MICHAEL NELSON, ILLINOIS PROFESSIONAL LAND SURVEYOR NO. 3095, HAVE SURVEYED AND SUBDIVIDED THE FOLLOWING DESCRIBED PROPERTY:

THAT PART OF THE SOUTH 30 ACRES OF THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2, TOWNSHIP 35 NORTH, RANGE 11 EAST OF THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS: BEGINNING AT THE SOUTHWEST CORNER OF THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2; THENCE NORTH ALONG THE WEST LINE OF THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2, A DISTANCE OF 692.72 FEET TO A POINT; THENCE EASTERLY ALONG A LINE PARALLEL TO THE SOUTH LINE OF THE NORTHWEST QUARTER OF SAID SECTION 2, A DISTANCE OF 693.85 FEET TO A POINT; THENCE SOUTHWESTERLY ALONG A LINE WHICH FORMS AN ANGLE OF 45 DEGREES 54 MINUTES 40 SECONDS WITH THE LAST DESCRIBED COURSE AS MEASURED FROM WEST TO SOUTHWEST, A DISTANCE OF 984.33 FEET TO A POINT ON THE SOUTH LINE OF THE NORTHWEST QUARTER OF SAID SECTION 2, SAID POINT BEING 12.00 FEET EAST OF THE SOUTHWEST CORNER OF THE EAST HALF OF THE NORTHWEST QUARTER OF SAID SECTION 2; THENCE WESTERLY ALONG THE SOUTH LINE OF THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2, A DISTANCE OF 12.00 FEET TO THE POINT OF BEGINNING, IN WILL COUNTY, ILLINOIS EXCEPT FROM THE ABOVE DESCRIBED PROPERTY THAT PART DEDICATED FOR PUBLIC HIGHWAY, IN WILL COUNTY, ILLINOIS AND EXCEPT THAT PART CONVEYED TO STEVEN P. HOWELL IN DOCUMENT NUMBER R2000-072908 DESCRIBED AS FOLLOWS: THAT PART OF THE SOUTH 30 ACRES OF THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2, IN TOWNSHIP 35 NORTH AND IN RANGE 11, EAST OF THE THIRD PRINCIPAL MERIDIAN, DESCRIBED AS FOLLOWS: COMMENCING AT SAID SOUTHWEST CORNER OF THE EAST HALF OF THE NORTHWEST 1/4; THENCE NORTH ALONG THE WEST LINE TO THE EAST HALF OF THE NORTHWEST QUARTER OF SECTION 2, A DISTANCE OF 527.72 FEET TO THE POINT OF BEGINNING; THENCE NORTH, 165.00 FEET TO A POINT; THENCE SOUTH 44 DEGREES 33 MINUTES 58 SECONDS EAST, A DISTANCE OF 692.89 FEET TO A POINT; THENCE SOUTH 44 DEGREES 47 MINUTES 57 SECONDS WEST, A DISTANCE OF 230.72 FEET TO A POINT; THENCE NORTH 87 DEGREES 10 MINUTES 14 SECONDS WEST, A DISTANCE OF 73.59 FEET TO A POINT; THENCE NORTH 57 DEGREES 54 MINUTES 54 SECONDS EAST, A DISTANCE OF 32.46 FEET TO A POINT; THENCE WEST A DISTANCE OF 405.25 FEET TO A POINT; THENCE SOUTH 45 DEGREES 00 MINUTES 00 SECONDS WEST, A DISTANCE OF 28.28 FEET TO A POINT; THENCE WEST, A DISTANCE OF 33.00 FEET TO THE POINT OF BEGINNING, IN WILL COUNTY, ILLINOIS.

CONTAINING 3.532 ACRES MORE OR LESS.

AS SHOWN ON THIS SUBDIVISION PLAT, WHICH IS A CORRECT REPRESENTATION OF SAID SURVEY AND SUBDIVISION. ALL DISTANCES ARE SHOWN IN FEET AND DECIMALS THEREOF. I FURTHER CERTIFY THAT THESE PARCELS LIE WITHIN 1.5 MILES OF THE VILLAGES OF HOMER GLEN, MOKENA AND NEW LENOX.

I FURTHER CERTIFY THAT THE PROPERTY COVERED BY THIS PLAT OF SUBDIVISION IS DETERMINED TO BE OUTSIDE THE 500 YEAR FLOODPLAIN AS IDENTIFIED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY MAP NUMBER 17197C0190 C WITH AN EFFECTIVE DATE OF SEPTEMBER 5, 1995.

I HEREBY AUTHORIZE THE MANAGER OF PARK ROAD, L.L.C. TO RECORD THE ANNEXED PLAT OF SUBDIVISION.

THIS PROFESSIONAL SERVICE CONFORMS TO THE CURRENT ILLINOIS MINIMUM STANDARDS FOR A BOUNDARY SURVEY.

GIVEN UNDER MY HAND AND SEAL AT WESTMONT, ILLINOIS
THIS 10TH DAY OF OCTOBER, 2013

BY:_____
MICHAEL NELSON
ILLINOIS PROFESSIONAL LAND SURVEYOR NO. 3095
PROFESSIONAL DESIGN FIRM LICENSE NO. 184-004838 EXPIRES 04/30/2015
FIELD WORK COMPLETED ON OCTOBER 10, 2013
NOVEMBER 13, 2013 REVISED COMMENTS/NOTARY CERT.
AUGUST 20, 2014 REVISED LOT SIZE, EASE. & BLDG. LINES
AUGUST 25, 2014 REVISED LOT SIZE, EASE. & BLDG. LINES
AUGUST 30, 2014 REVISED LOT SIZE, EASE. & BLDG. LINES
SEPTEMBER 3, 2014 REVISED ACCESS EASE.
OCTOBER 10, 2014 REVISED CERTS, REM. LT. 3

MICHAEL J. NELSON
035-3095
PROFESSIONAL LAND SURVEYOR
STATE OF ILLINOIS
WESTMONT, ILLINOIS

MY LICENSE EXPIRES NOVEMBER 30, 2016

13-19-CPS-PROJ/13-19-SUB-2013-1004