



REDRAWN FROM A SURVEY BY: CLAYTON STIMMEL

Signature by a representative of the County Health Dept. denotes compliance with Health Regulations.
Signed: _____ Date: _____

Signature by a representative of the Auglaize County Regional Planning Commission denotes approval of this plat.
Signed: _____ Date: _____

Signature by a representative of City with 3 mile limit jurisdiction or Twp. Trustees or Village with zoning jurisdiction denotes approval of this plat. Signed: _____
for political S. D. of: _____ Date: _____

Signature by a representative of the County Engineer's Dept. denotes that this plat meets tax map plat requirements.
Signed: _____ Date: _____

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Client DAN MILLER
County AUGLAIZE Twp. WAYNE Sec. 19 SW 1/4
Drawn by 2105 Scale 1" = 100' Drwg. No. 72-5733
Checked by _____ Date 10/4/72
Sheet _____ of _____ (T 5 S; R 8 E)

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