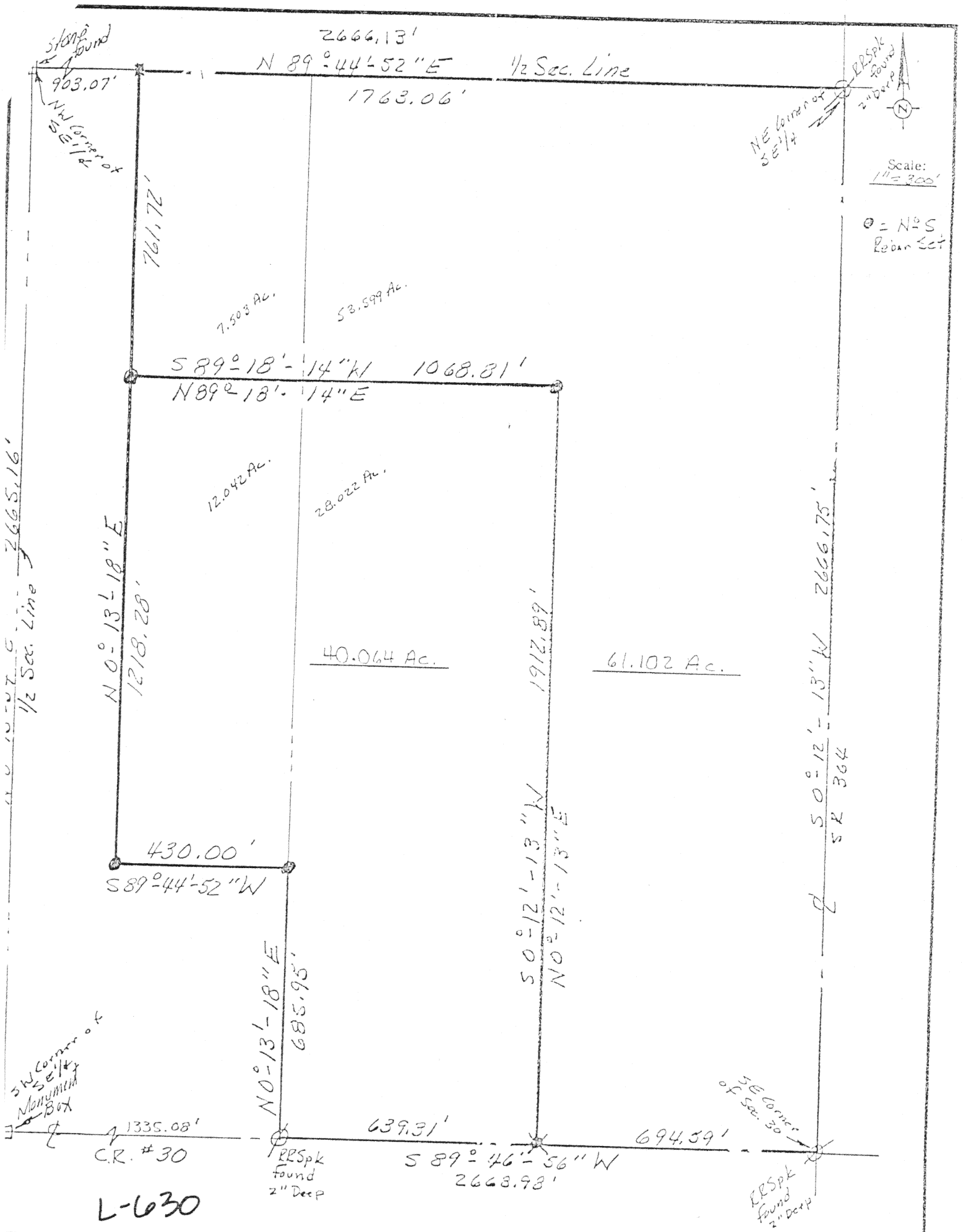

nature by a representative of the County Health Dept. notes compliance with Health Regulations. Signed: _____ Date _____	Signature by a representative of the Auglaize County Regional Planning Commission denotes approval of this plat. Signed: _____ Date _____
nature by a representative of City with 3 mile limit jurisdiction or Twp. Trustees or Village with zoning jurisdiction notes approval of this plat. Signed: _____ Political Subd. _____ Date _____	Signature by a representative of the County Engineer's Dept. denotes that this plat meets tax map plat requirements. Signed: _____ Date _____

WM. G. FULTZ, JR. 5173 REGISTERED SURVEYOR

William G. Fultz P.S. No. 5173

Client Maurice M. Schmiesing Vol. 192 P. 1052
County Auglaize Twp. Jackson Sec. 30
Drawn by WE Scale 1" = 300' Drwg. No. 1
Checked by WE Date 26 April 1993
Sheet 1 of 1 J-526 (T 7 S; R 4 E)