

N-48

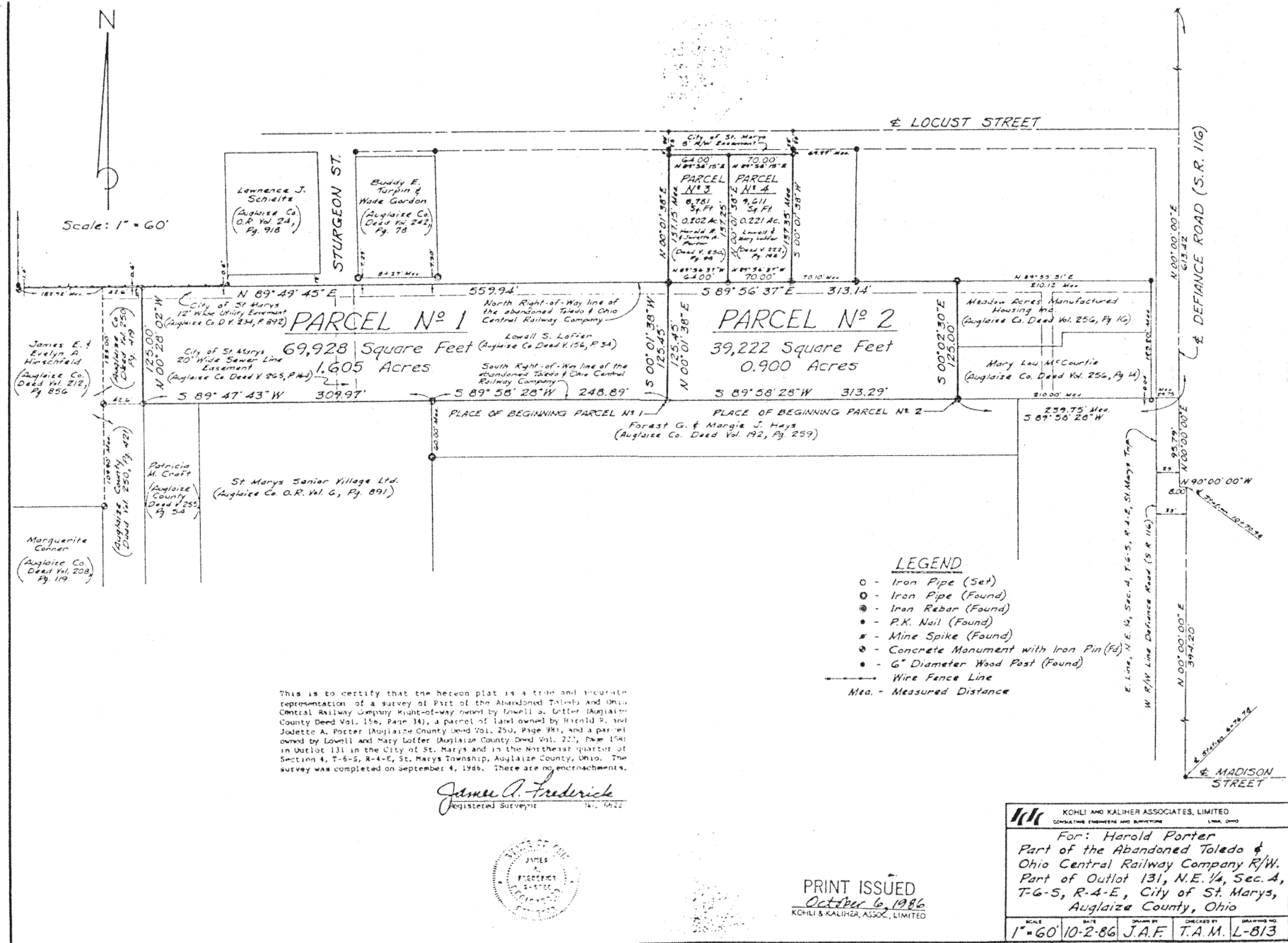
Client _____
County _____
Drawn by _____
Checked by _____
Sheet _____ of _____
(T _____ S _____ R _____ E)

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: _____ Date _____

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

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 _____



REDUCED FROM ORIGINAL PRINT