SAMPLES OF LOT LINE ELIMINATION SIGNATURE BLOCKS

The following are samples of signature blocks typically required on Lot Line Elimination plats. Before a final plat can be approved, all information on the plat, including signature blocks, must be accurate and correct as to form. The following samples should be used to prepare Lot Line Elimination plat signature blocks that meet city requirements.

OWNER'S CERTIFICATE

_____, BEING THE OWNER OF (LEGAL DESCRIPTION), DOES HEREBY APPROVE THIS LOT LINE ELIMINATION PLAT SHOWN HEREON.

BY: (NAME OF INDIVIDUAL)
ACKNOWLEDGEMENT
STATE OF COLORADO)) SS. COUNTY OF)
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS DAY OF, 20, BY (NAME OF INDIVIDUAL).
WITNESS MY HAND AND SEAL. MY COMMISSION EXPIRES:
[SEAL]
NOTARY PUBLIC
THE UNDERSIGNED, A BENEFICIARY UNDER A CERTAIN DEED OF TRUST ENCUMBERING THE PROPERTY, HEREBY EXPRESSLY CONSENTS TO AND JOINS IN THE EXECUTION AND RECORDING OF THIS SUBDIVISION PLAT, DEDICATION AND EASEMENTS SHOWN HEREON AND MAKES THE DEED OF TRUST SUBORDINATE HERETO. THE UNDERSIGNED REPRESENTS THAT HE OR SHE HAS FULL POWER AND AUTHORITY TO EXECUTE THIS LENDER'S CONSENT AND SUBORDINATION ON BEHALF OF THE ABOVE-STATED LENDER. (NAME OF BANK)
BY: AUTHORIZED REPRESENTATIVE
ACKNOWLEDGMENT
STATE OF)) SS. COUNTY OF)
THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS DAY OF, 20, BYASOF (NAME OF BANK).
WITNESS MY HAND AND SEAL. MY COMMISSION EXPIRES:
[SEAL]

NOTARY PUBLIC

APPROVALS

DIRECTOR OF PLANNING

DIRECTOR OF PUBLIC WORKS AND UTILITIES

QWEST CORPORATION

PUBLIC SERVICE COMPANY OF COLORADO

CITY MANAGER'S CERTIFICATE

IN WITNESS WHEREOF, THE SAID CITY OF BOULDER HAS CAUSED ITS SEAL TO BE HEREUNTO AFFIXED BY ITS CITY MANAGER THIS _____ DAY OF _____, 20___.

ATTEST:

CITY CLERK ON BEHALF OF THE
DIRECTOR OF FINANCE AND RECORD

CITY MANAGER

CLERK AND RECORDER'S CERTIFICATE

STATE OF COLORADO)) SS.

COUNTY OF BOULDER)

I HEREBY CERTIFY THAT THIS INSTRUMENT WAS FILED IN MY OFFICE AT

_____ O'CLOCK __. M., THIS _____ DAY OF _____,

20, AND IS RECORDED AT RECEPTION #	
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FEES PAID: \$_____.

CLERK AND RECORDER

DEPUTY