Herriman City Standard Plat Title Block

SURVEYOR'S CERTIFICATE

I, _____, do hereby certify that I am a Registered Civil Engineer, and or Land Surveyor, and that I hold certificate No._____, as prescribed under the laws of the State of Utah. I further certify that by authority of the Owners, I have made a survey of the tract of land shown on this plat and described below, and have subdivided said tract of land into lots and streets, hereafter to be known as _____ and that same has been correctly surveyed and staked on the ground as shown on this plat.

BOUNDARY DESCRIPTION

_____ _____
Date

OWNER'S DEDICATION

Known all men by these presents that _____, the _____undersigned Owner(s) of the above described tract of land, having caused same to be subdivided into lots and streets to be hereafter known as the

_____

do hereby dedicate for perpetual use of the public all parcels of land shown on this plat as intended for Public use. Owner(s) hereby agree to warrant and defend and save the City harmless against any easements or other encumbrance on a dedicated street which will interfere with the City's use, maintenance, and operation of the street.
In witness whereof _____ have hereunto set _____ this _____ day of _____ A.D., 20_____

_____ _____
_____ _____
_____ _____
_____ _____
_____ _____

NOTES:

1. IT WILL BE THE DEVELOPER'S RESPONSIBILITY TO USE APPROPRIATE NOTARY ACKNOWLEDGEMENT *(SEE APPENDIX B)*.

2. ALL FINAL PLAT SUBMITTALS MUST INCLUDE A TITLE REPORT NO OLDER THAN 6 MONTHS.

ACKNOWLEDGEMENT

STATE OF UTAH : S.S.
County of Salt Lake :
On the _____ day of _____ A.D., 20____, personally appeared before me, _____ the signer of the above instrument, who duly who duly acknowledged to me that he or she executed the same.

_____

NOTARY PUBLIC
RESIDING AT:

_____

TABULATIONS:

1. *TOTAL PLAT ACREAGE_____ACRES*
2. *TOTAL LOT ACREAGE_____ACRES*
3. *TOTAL ACREAGE IN STREETS_____ACRES*
4. *TOTAL ACREAGE IN OPEN SPACE_____ACRES*
5. *AVERAGE LOT SIZE_____S.F.*
6. *NUMBER OF LOTS_____#*

HEALTH DEPARTMENT	***COMCAST***	***CENTURY LINK COMMUNICATION***	***ROCKY MOUNTAIN POWER***	***SOUTH VALLEY SEWER DISTRICT***	***QUESTAR GAS***
APPROVED THIS _____DAY OF _____ A.D. 20_____ BY HEALTH DEPARTMENT	*APPROVED THIS_____ DAY OF_____ A.D. 20_____ BY COMCAST*	*APPROVED THIS_____ DAY OF_____ A.D. 20____ BY CENTURY LINK COMMUNICATIONS*	*APPROVED THIS_____ DAY OF _____ A.D. 20 ____ BY ROCKY MOUNTAIN POWER.*	*APPROVED THIS _____DAY OF _____ A.D. 20 ____ BY S.V.S.D.*	*APPROVED THIS _____DAY OF _____ A.D. 20 _____ BY QUESTAR GAS*
DIRECTOR, SALT LAKE CO. HEALTH DEPARTMENT	*COMCAST*	*CENTURY LINK COMMUNICATIONS*	*ROCKY MOUNTAIN POWER*	*S.V.S.D.*	*QUESTAR GAS*

CHECKED FOR ZONING	***PLANNING COMMISSION***	***HERRIMAN CITY MUNICIPAL WATER***	***HERRIMAN CITY ENGINEER***	***APPROVAL AS TO FORM***	***HERRIMAN CITY***	***RECORD #***
ZONE:_____DATE:_____ AREA:_____ WIDTH:_____ NAME:_____	*APPROVED THIS DAY OF_____ A.D. 20____ BY HERRIMAN PLANNING COMMISSION*	*APPROVED THIS _____DAY OF _____ A.D. 20 BY HERRIMAN CITY MUNICIPAL WATER*	*I HERE BY CERTIFY THAT THIS OFFICE HAS EXAMINED THIS PLAT AND IT IS CORRECT IN ACCORDANCE WITH INFORMATION ON FILE IN THIS OFFICE*	*APPROVED AS TO FORM THIS _____ DAY OF_____ A.D. 20____*	*APPROVED THIS_____ DAY OF_____ A.D. 20 ____ BY HERRIMAN CITY.*	*STATE OF UTAH COUNTY OF SALT LAKE RECORDED AND FILED AT THE REQUEST OF _____ DATE_____TIME _____BOOK_____PAGE _____*
	CHAIRMAN, HERRIMAN PLANNING COMMISSION	*HERRIMAN CITY*	*DATE HERRIMAN CITY ENGINEER*	*HERRIMAN CITY ATTORNEY*	*ATTEST: RECORDER MAYOR*	*FEE $ SALT LAKE COUNTY RECORDER*