## **RESOLUTION**

Use black ink

DCROD 3/1/2002

At the <i>(City / Village / Town)</i> of				
	, the following			
esolution was adopted concerni Give the legal description of the affect ttached.")	ng land in Dane County described as: ted property or, if attached, say "see			
		Recording	g area	
		Name and	ame and return address:	
			CEL IDENTIFICATION NUMBER*	
		(*No	ot required for road right of ways)	
	Circulture of City // /illage /Tayya offi	:-1		
	Signature of City/Village/Town office	iai	Date	
opy of the resolution is ached.			_	
	Name printed			
	Title			
	CTATE OF WICCONCIN. County of			
	STATE OF WISCONSIN, County of			
	Subscribed and sworn to before me on person(s).		by the above named	
This document was drafted by: (print or type name below)	Signature of notary or other person authorized to administer an			
	oath (as per s. 706.06, 706.07)			
Names of persons signing in any	Print or type name:			
capacity must be typed or printed below their signature.		commission e	expires:	