

# TRACT MAP STATEMENTS

## OWNER'S STATEMENT

(I/WE) HEREBY CERTIFY THAT (I/WE) (AM/ARE) THE OWNER(S) OF, OR HAVE SOME RIGHT, TITLE OR INTEREST IN AND TO, THE REAL PROPERTY INCLUDED WITHIN THE DISTINCTIVE BOUNDARY SHOWN UPON THIS MAP AND THAT (I/WE) (AM/ARE) THE ONLY PERSON(S) WHOSE CONSENT IS NECESSARY TO PASS A CLEAR TITLE TO SAID PROPERTY, AND (I /WE) CONSENT TO THE PREPARATION AND RECORDATION OF SAID MAP. [If dedications are required] (I/WE) HEREBY DEDICATE TO THE PUBLIC, FOR PUBLIC USE... [Obtain dedication wording from DPW] ...ALL AS SHOWN UPON THIS MAP.

\_\_\_\_\_  
NAME [and title if needed] DATE \_\_\_\_\_

\_\_\_\_\_  
NAME [and title if needed] DATE \_\_\_\_\_

## ACKNOWLEDGMENT [See Civil Code 1189 for details]

A NOTARY PUBLIC OR OTHER OFFICER COMPLETING THIS CERTIFICATE VERIFIES ONLY THE IDENTITY OF THE INDIVIDUAL WHO SIGNED THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED, AND NOT THE TRUTHFULNESS, ACCURACY, OR VALIDITY OF THAT DOCUMENT.

[^ This statement MUST be inside a box^]

STATE OF CALIFORNIA

COUNTY OF \_\_\_\_\_

ON \_\_\_\_\_ BEFORE ME, \_\_\_\_\_,  
A NOTARY PUBLIC, PERSONALLY APPEARED \_\_\_\_\_,  
WHO PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S) WHOSE NAME(S)  
IS/ARE SUBSCRIBED TO THE WITHIN INSTRUMENT AND ACKNOWLEDGED TO ME THAT HE/SHE/THEY  
EXECUTED THE SAME IN HIS/HER/THEIR AUTHORIZED CAPACITY(IES), AND THAT BY HIS/HER/THEIR  
SIGNATURE(S) ON THE INSTRUMENT THE PERSON(S), OR THE ENTITY UPON BEHALF OF WHICH THE  
PERSON(S) ACTED, EXECUTED THE INSTRUMENT.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING PARAGRAPH IS TRUE AND CORRECT.

WITNESS MY HAND (SIGNATURE) \_\_\_\_\_

NAME (PRINT) \_\_\_\_\_

COMMISSION NUMBER \_\_\_\_\_

MY COMMISSION EXPIRES \_\_\_\_\_

NOTARY'S PRINCIPAL COUNTY OF BUSINESS \_\_\_\_\_

(OFFICIAL SEAL NOT REQUIRED)

**RECORD TITLE INTEREST STATEMENT**

IN ACCORDANCE WITH SECTION 66436 AND 66445 OF THE SUBDIVISION MAP ACT OF THE STATE OF CALIFORNIA, \_\_\_\_\_ (TRUSTEE / BENEFICIARY) UNDER THAT CERTAIN DEED OF TRUST RECORDED ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, (19\_\_\_\_ / 20\_\_\_\_), (AS DOCUMENT NUMBER \_\_\_\_\_ / IN BOOK \_\_\_\_\_, PAGE \_\_\_\_\_,) SHASTA COUNTY RECORDS, HEREBY CONSENTS TO THE PREPARATION AND RECORDATION OF THIS MAP.

\_\_\_\_\_  
DATE \_\_\_\_\_  
(BENEFICIARY / TRUSTEE)

TITLE \_\_\_\_\_

**STATEMENT OF CLERK OF BOARD OF SUPERVISORS**

I, DAVID J. RICKERT, CLERK OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SHASTA, HEREBY CERTIFY THAT SAID BOARD APPROVED THIS MAP ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_, AND WE ACCEPT ON BEHALF OF THE PUBLIC ALL OFFERS OF DEDICATION FOR THE ... [Obtain dedication wording from DPW] ...ALL AS SHOWN UPON THIS MAP.

\_\_\_\_\_  
DATE \_\_\_\_\_  
CLERK OF THE BOARD OF SUPERVISORS OF THE COUNTY OF SHASTA, STATE OF CALIFORNIA

\_\_\_\_\_  
DATE \_\_\_\_\_  
DEPUTY

**STATEMENT OF APPROVAL OF SECRETARY OF SHASTA COUNTY PLANNING COMMISSION**

I, RICHARD W. SIMON, SECRETARY OF THE SHASTA COUNTY PLANNING COMMISSION, HEREBY CERTIFY THAT I HAVE EXAMINED THIS MAP THAT THE SUBDIVISION AS SHOWN HEREON IS SUBSTANTIALLY THE SAME AS IT APPEARED ON THE TENTATIVE MAP, AND ANY APPROVED ALTERATIONS THEREOF, AS APPROVED BY THE SHASTA COUNTY PLANNING COMMISSION ON \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
DATE \_\_\_\_\_  
SECRETARY, SHASTA COUNTY PLANNING COMMISSION

**STATEMENT OF COUNTY ENVIRONMENTAL HEALTH DIRECTOR**

I, JIM WHITTLE, DIRECTOR OF ENVIRONMENTAL HEALTH OF SHASTA COUNTY, HEREBY CERTIFY THAT ALL HEALTH AND SANITATION CONDITIONS ESTABLISHED ON THE TENTATIVE MAP, AND ANY APPROVED ALTERATIONS THEREOF, AS APPROVED BY THE SHASTA COUNTY PLANNING COMMISSION ON \_\_\_\_\_, 20\_\_\_\_, HAVE BEEN MET OR GUARANTEED.

\_\_\_\_\_  
DATE \_\_\_\_\_  
SHASTA COUNTY DIRECTOR OF ENVIRONMENTAL HEALTH

**STATEMENT OF COUNTY TAX COLLECTOR**

I, LORI J. SCOTT, TAX COLLECTOR OF SHASTA COUNTY, HEREBY CERTIFY THAT THERE ARE NO LIENS FOR UNPAID STATE, COUNTY, OR LOCAL TAXES OR SPECIAL ASSESSMENTS AGAINST THE LAND INCLUDED WITHIN THIS SUBDIVISION, OR ANY PART THEREOF, EXCEPT TAXES OR SPECIAL ASSESSMENTS NOT YET PAYABLE AGAINST SAID SUBDIVISION OR ANY PART THEREOF, AND THAT THIS CERTIFICATE DOES NOT INCLUDE ANY ASSESSMENTS OF ANY ASSESSMENT DISTRICTS, THE BONDS OF WHICH HAVE NOT YET BECOME A LIEN AGAINST SAID LAND OR ANY PART THEREOF.

\_\_\_\_\_  
DATE \_\_\_\_\_  
TAX COLLECTOR, COUNTY OF SHASTA, CALIFORNIA

**STATEMENT OF GEOTECHNICAL OR CIVIL ENGINEER (SOILS)**

I, \_\_\_\_\_, A REGISTERED CIVIL ENGINEER, HAVE PREPARED A SOILS REPORT, DATED \_\_\_\_\_, 20\_\_\_\_, IN ACCORDANCE WITH SHASTA COUNTY ORDINANCE CODE, SAID REPORT IS ON FILE WITH THE SHASTA COUNTY DEPARTMENT OF PUBLIC WORKS, AND THE REPORT (DOES / DOES NOT) INDICATE THE PRESENCE OF CRITICALLY EXPANSIVE SOILS OR OTHER SOILS PROBLEMS, WHICH, IF NOT CORRECTED, COULD LEAD TO STRUCTURAL DEFECTS. [If needed] SAID SOILS REPORT (DOES / DOES NOT) INCLUDE THE RECOMMENDED CORRECTIVE ACTION WHICH IS LIKELY TO PREVENT THE STRUCTURAL DAMAGE.

\_\_\_\_\_  
STATE OF CALIFORNIA REGISTERED CIVIL ENGINEER

R.C.E. NO. \_\_\_\_\_

**STATEMENT OF (SURVEYOR / ENGINEER)**

THIS MAP WAS PREPARED BY ME OR UNDER MY DIRECTION AND IS BASED UPON A TRUE AND COMPLETE FIELD SURVEY IN CONFORMANCE WITH THE REQUIREMENTS OF THE SUBDIVISION MAP ACT AND LOCAL ORDINANCE ON \_\_\_\_\_, 20\_\_\_\_, AT THE REQUEST OF \_\_\_\_\_ . I HEREBY STATE THAT THIS TRACT MAP SUBSTANTIALLY CONFORMS TO THE APPROVED OR CONDITIONALLY APPROVED TENTATIVE MAP, IF ANY, AND THAT THE MONUMENTS ARE OF THE CHARACTER AND OCCUPY THE POSITIONS INDICATED, AND THAT THE MONUMENTS ARE SUFFICIENT TO ENABLE THE SURVEY TO BE RETRACED.

\_\_\_\_\_  
DATE \_\_\_\_\_

(R.C.E. NO. \_\_\_\_\_ / L.S. NO. \_\_\_\_\_)

**COUNTY ENGINEER'S STATEMENT**

I, C. TROY BARTOLOMEI, DIRECTOR OF PUBLIC WORKS FOR SHASTA COUNTY, HEREBY STATE THAT I HAVE EXAMINED THIS MAP, THAT THE SUBDIVISION AS SHOWN HEREON IS SUBSTANTIALLY THE SAME AS IT APPEARED ON THE TENTATIVE MAP AND ANY APPROVED ALTERATIONS THEREOF AS APPROVED BY THE SHASTA COUNTY PLANNING COMMISSION ON \_\_\_\_\_, 20\_\_\_\_, THAT ALL THE PROVISIONS OF THE CALIFORNIA SUBDIVISION MAP ACT AS AMENDED, AND OF THE SHASTA COUNTY ORDINANCE CODE APPLICABLE AT THE TIME OF APPROVAL SAID TENTATIVE MAP HAVE BEEN COMPLIED WITH.

\_\_\_\_\_  
SHASTA COUNTY DIRECTOR OF PUBLIC WORKS

\_\_\_\_\_  
DEPUTY DIRECTOR

**COUNTY SURVEYOR'S STATEMENT**

I, C. TROY BARTOLOMEI, COUNTY SURVEYOR OF SHASTA COUNTY, HEREBY STATE I HAVE EXAMINED THIS MAP AND THAT I AM SATISFIED THAT THIS MAP IS TECHNICALLY CORRECT.

\_\_\_\_\_  
SHASTA COUNTY SURVEYOR  
L.S. NO. 7101

\_\_\_\_\_  
DEPUTY COUNTY SURVEYOR

L.S. NO. \_\_\_\_\_

**COUNTY RECORDER'S STATEMENT**

FILED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_, AT \_\_\_\_\_ M, IN BOOK \_\_\_\_\_ OF MAPS, PAGE \_\_\_\_\_, AT THE REQUEST OF C. TROY BARTOLOMEI.

\_\_\_\_\_  
LESLIE J. MORGAN, SHASTA COUNTY RECORDER

\_\_\_\_\_  
DEPUTY

FEE: \_\_\_\_\_

**PARCEL MAP STATEMENTS**

**OWNER'S STATEMENT**

(I/WE) HEREBY CERTIFY THAT (I/WE) (AM/ARE) THE OWNER(S) OF, OR HAVE SOME RIGHT, TITLE OR INTREST IN AND TO, THE REAL PROPERTY INCLUDED WITHIN THE DISTINCTIVE BOUNDARY SHOWN UPON THIS MAP AND THAT (I/WE) (AM/ARE) THE ONLY PERSON(S) WHOSE CONSENT IS NECESSARY TO PASS A CLEAR TITLE TO SAID PROPERTY, AND (I /WE) CONSENT TO THE PREPARATION AND RECORDATION OF SAID MAP. [If dedications are required] (I/WE) HEREBY DEDICATE TO THE PUBLIC, FOR PUBLIC USE... [Obtain dedication wording from DPW] ...ALL AS SHOWN UPON THIS MAP.

\_\_\_\_\_  
NAME [and title if needed] \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
NAME [and title if needed] \_\_\_\_\_ DATE \_\_\_\_\_

**ACKNOWLEDGMENT** [See Civil Code 1189 for details]

A NOTARY PUBLIC OR OTHER OFFICER COMPLETING THIS CERTIFICATE VERIFIES ONLY THE IDENTITY OF THE INDIVIDUAL WHO SIGNED THE DOCUMENT TO WHICH THIS CERTIFICATE IS ATTACHED, AND NOT THE TRUTHFULNESS, ACCURACY, OR VALIDITY OF THAT DOCUMENT.

[^ This statement MUST be inside a box^]

STATE OF CALIFORNIA

COUNTY OF \_\_\_\_\_

ON \_\_\_\_\_ BEFORE ME, \_\_\_\_\_,  
A NOTARY PUBLIC, PERSONALLY APPEARED \_\_\_\_\_,  
WHO PROVED TO ME ON THE BASIS OF SATISFACTORY EVIDENCE TO BE THE PERSON(S) WHOSE NAME(S) IS/ARE SUBSCRIBED TO THE WITHIN INSTRUMENT AND ACKNOWLEDGED TO ME THAT HE/SHE/THEY EXECUTED THE SAME IN HIS/HER/THEIR AUTHORIZED CAPACITY(IES), AND THAT BY HIS/HER/THEIR SIGNATURE(S) ON THE INSTRUMENT THE PERSON(S), OR THE ENTITY UPON BEHALF OF WHICH THE PERSON(S) ACTED, EXECUTED THE INSTRUMENT.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING PARAGRAPH IS TRUE AND CORRECT.

WITNESS MY HAND (SIGNATURE) \_\_\_\_\_

NAME (PRINT) \_\_\_\_\_

COMMISSION NUMBER \_\_\_\_\_

MY COMMISSION EXPIRES \_\_\_\_\_

NOTARY'S PRINCIPAL COUNTY OF BUSINESS \_\_\_\_\_

(OFFICIAL SEAL NOT REQUIRED)

**RECORD TITLE INTEREST STATEMENT**

IN ACCORDANCE WITH SECTION 66436 AND 66445 OF THE SUBDIVISION MAP ACT OF THE STATE OF CALIFORNIA, \_\_\_\_\_

(TRUSTEE / BENEFICIARY) UNDER THAT CERTAIN DEED OF TRUST RECORDED ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, (19\_\_\_\_ / 20\_\_\_\_), (AS DOCUMENT NUMBER \_\_\_\_\_ / IN BOOK \_\_\_\_\_, PAGE \_\_\_\_\_,) SHASTA COUNTY RECORDS, HEREBY CONSENTS TO THE PREPARATION AND RECORDATION OF THIS MAP.

\_\_\_\_\_  
(BENEFICIARY / TRUSTEE) DATE \_\_\_\_\_

TITLE \_\_\_\_\_

**STATEMENT OF DEDICATION ACCEPTANCE**

I, C. TROY BARTOLOMEI, DIRECTOR OF PUBLIC WORKS OF THE COUNTY OF SHASTA, UNDER THE AUTHORITY GRANTED TO ME BY THE BOARD OF SUPERVISORS OF THE COUNTY OF SHASTA ON JUNE 18, 1985, BY THE ADOPTION OF RESOLUTION NUMBER 85-144, ACCEPT ON BEHALF OF THE PUBLIC ALL OFFERS OF DEDICATION FOR THE ... [Obtain dedication wording from DPW] ...ALL AS SHOWN UPON THIS MAP.

\_\_\_\_\_  
SHASTA COUNTY DIRECTOR OF PUBLIC WORKS DATE \_\_\_\_\_

\_\_\_\_\_  
DEPUTY DIRECTOR DATE \_\_\_\_\_

**STATEMENT OF COUNTY TAX COLLECTOR**

I, LORI J. SCOTT, TAX COLLECTOR OF SHASTA COUNTY, HEREBY CERTIFY THAT THERE ARE NO LIENS FOR UNPAID STATE, COUNTY, OR LOCAL TAXES OR SPECIAL ASSESSMENTS AGAINST THE LAND INCLUDED WITHIN THIS SUBDIVISION, OR ANY PART THEREOF, EXCEPT TAXES OR SPECIAL ASSESSMENTS NOT YET PAYABLE AGAINST SAID SUBDIVISION OR ANY PART THEREOF, AND THAT THIS CERTIFICATE DOES NOT INCLUDE ANY ASSESSMENTS OF ANY ASSESSMENT DISTRICTS, THE BONDS OF WHICH HAVE NOT YET BECOME A LIEN AGAINST SAID LAND OR ANY PART THEREOF.

\_\_\_\_\_  
TAX COLLECTOR, COUNTY OF SHASTA, CALIFORNIA DATE \_\_\_\_\_

**STATEMENT OF (SURVEYOR / ENGINEER)**

THIS MAP WAS PREPARED BY ME OR UNDER MY DIRECTION AND IS BASED UPON A TRUE AND COMPLETE FIELD SURVEY IN CONFORMANCE WITH THE REQUIREMENTS OF THE SUBDIVISION MAP ACT AND LOCAL ORDINANCE ON \_\_\_\_\_, 20\_\_\_\_, AT THE REQUEST OF \_\_\_\_\_. I HEREBY STATE THAT THIS PARCEL MAP SUBSTANTIALLY CONFORMS TO THE APPROVED OR CONDITIONALLY APPROVED TENTATIVE MAP, IF ANY, AND THAT THE MONUMENTS ARE OF THE CHARACTER AND OCCUPY THE POSITIONS INDICATED, AND THAT THE MONUMENTS ARE SUFFICIENT TO ENABLE THE SURVEY TO BE RETRACED.

\_\_\_\_\_  
DATE \_\_\_\_\_

(R.C.E. NO. \_\_\_\_\_ / L.S. NO. \_\_\_\_\_)

**COUNTY ENGINEER'S STATEMENT**

I, C. TROY BARTOLOMEI, DIRECTOR OF PUBLIC WORKS FOR SHASTA COUNTY, HEREBY STATE THAT I HAVE EXAMINED THIS MAP, THAT THE SUBDIVISION AS SHOWN HEREON IS SUBSTANTIALLY THE SAME AS IT APPEARED ON THE TENTATIVE MAP AND ANY APPROVED ALTERATIONS THEREOF AS APPROVED BY THE SHASTA COUNTY PLANNING COMMISSION ON \_\_\_\_\_, 20\_\_\_\_, THAT ALL THE PROVISIONS OF THE CALIFORNIA SUBDIVISION MAP ACT AS AMENDED, AND OF THE SHASTA COUNTY ORDINANCE CODE APPLICABLE AT THE TIME OF APPROVAL SAID TENTATIVE MAP HAVE BEEN COMPLIED WITH.

\_\_\_\_\_  
SHASTA COUNTY DIRECTOR OF PUBLIC WORKS DATE \_\_\_\_\_

\_\_\_\_\_  
DEPUTY DIRECTOR DATE \_\_\_\_\_

**COUNTY SURVEYOR'S STATEMENT**

I, SHAWN R. ANKENY, COUNTY SURVEYOR OF SHASTA COUNTY, HEREBY STATE I HAVE EXAMINED THIS MAP AND THAT I AM SATISFIED THAT THIS MAP IS TECHNICALLY CORRECT.

\_\_\_\_\_  
SHASTA COUNTY SURVEYOR DATE \_\_\_\_\_  
L.S. NO. 9550

\_\_\_\_\_  
DEPUTY COUNTY SURVEYOR DATE \_\_\_\_\_  
L.S. NO. \_\_\_\_\_

**COUNTY RECORDER'S STATEMENT**

FILED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_, AT \_\_\_\_\_ M, IN BOOK \_\_\_\_\_ OF PARCEL MAPS, PAGE \_\_\_\_\_, AT THE REQUEST OF C. TROY BARTOLOMEI.

\_\_\_\_\_  
LESLIE J. MORGAN, SHASTA COUNTY RECORDER

\_\_\_\_\_  
DEPUTY

FEE: \_\_\_\_\_

**RECORD OF SURVEY STATEMENTS**

**STATEMENT OF (SURVEYOR / ENGINEER)**

THIS MAP CORRECTLY REPRESENTS A SURVEY MADE BY ME OR UNDER MY DIRECTION IN CONFORMANCE WITH THE REQUIREMENTS OF THE PROFESSIONAL LAND SURVEYOR'S ACT AT THE REQUEST OF

\_\_\_\_\_, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_,

\_\_\_\_\_  
DATE \_\_\_\_\_

(R.C.E. NO. \_\_\_\_\_ / L.S. NO. \_\_\_\_\_)

**COUNTY SURVEYOR'S STATEMENT**

THIS MAP HAS BEEN EXAMINED IN ACCORDANCE WITH SECTION 8766 OF THE PROFESSIONAL LAND SURVEYOR'S ACT THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_,

\_\_\_\_\_  
DATE \_\_\_\_\_

SHASTA COUNTY SURVEYOR  
L.S. NO. 9550

\_\_\_\_\_  
DATE \_\_\_\_\_

DEPUTY COUNTY SURVEYOR

L.S. NO. \_\_\_\_\_

**COUNTY RECORDER'S STATEMENT**

FILED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_, AT \_\_\_\_\_ M, IN BOOK \_\_\_\_\_ OF LAND SURVEYS, PAGE \_\_\_\_\_, AT THE REQUEST OF C. TROY BARTOLOMEI.

\_\_\_\_\_  
LESLIE J. MORGAN, SHASTA COUNTY RECORDER

\_\_\_\_\_  
DEPUTY

FEE: \_\_\_\_\_