APPROVED:

NOTE: NO FURTHER SUBDIVISION OF ANY OF THE PARCELS SHOWN HEREON SHALL BE ALLOWED WITHOUT THE PRIOR APPROVAL OF THE SHELBY COUNTY PUBLIC WORKS DEPARTMENT AND THE SHELBY COUNTY PLANNING DEPARTMENT.

NOTE: ALL PARCELS SHOWN HEREON MUST HAVE INDIVIDUAL APPROVAL FROM THE SHELBY COUNTY HEALTH DEPARTMENT PRIOR TO THE CONSTRUCTION OR INSTALLATION OF ANY RESIDENCE OR HUMAN HABITITION STRUCTURE.

NOTE: ALL PARCELS SHOWN HEREON ARE SUBJECT TO ANY AND ALL RIGHTS OF WAY, EASEMENTS, RESTRICTIONS, LIMITATIONS, AGREEMENTS AND/OR PROHABIT-ATIONS OF PROBATED RECORD OR APPLICABLE LAW.

as Notary Public in and for said Count; and State, do hereby certify that J.S. Pilkington whose name is signed to the foregoing instrument as a Engineer and Surveyor, is known to me, acknowledged before me on this date, that after having been informed of the contents of said insturment, he executed the same voluntarily, with full authority thereof.

Given under my hand and seal this\_\_\_\_ Notary Public

State of Alabama:

County of Shelby: \_, as Notary Public in and for said County and State, do hereby certify that H.M. Autry, III (owner), whose name is signed to the foregoing instrument as owner and is known to me, acknowledged before me on this date, that agter having been informed of the contents of said instrument he executed same voluntarily, with full authority thereof.

Given under my hand and seal this 5 day of Apail, 19 90 Notary Public