

Recording Requested By:

When Recorded Return To:

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

SEWAGE DISPOSAL SYSTEM VESTING CERTIFICATE

Name: CLARK DAVID B
Address: 2274 WELLSRING RD BEN
APN: 055-150-016
Permit #: VES11-0020

The above site has been reviewed and found to be in compliance with State and County sewage disposal system regulations. This approval will remain valid for the time period noted below. However, new Statewide regulations go into effect January 1, 2004. This certificate or portions of the certificate may become invalid due to the effect of these Statewide regulations.

Pursuant to Sonoma County Code Section 24-56:

1. A private sewage disposal permit will be issued for the approved sewage disposal system design if proper application is made and fees are paid prior to 08/14/2014 (three years from date of issuance).
2. A clearance to connect to the existing septic system will be approved if proper application is made and fees are paid prior to (two years from date of issuance).
3. Proof of water yield per Sonoma County Code 7-12 is required for permit issuance.
4. Provide letter authorizing connection to water system.

This certificate will expire and become null and void if proper application for a private sewage disposal permit (box 1 above) or for clearance (box 2 above) is not made within the specified time period. The site will be subject to all regulations in effect upon expiration of a certificate.

This certificate may be revoked for causes specified in Sonoma County Code Section 24-57.

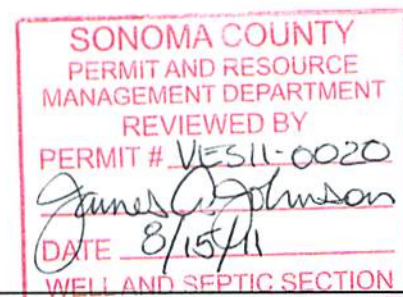
Date of certificate issuance: 08/15/2011

System type(s): Mound System

Approved number of bedrooms: 5

Approved by:

(Not valid without Department stamp in space at right)



CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

State of California

County of SONOMA

On August 16, 2011 before me, SCOTT I. HUNSPERGER, NOTARY PUBLIC

personally appeared JAMES A. JOHNSON

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 and official seal.

Signature: Scott I. Hunsperger

Place Notary Seal Above

Signature of Notary Public

OPTIONAL

Though the information below is not required by law, it may prove valuable to persons relying on the document and could prevent fraudulent removal and reattachment of this form to another document.

Description of Attached Document

Title or Type of Document: Vesting Certificate VES11-0020

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

- Corporate Officer - Title(s):
Individual
Partner - Limited General
Attorney in Fact
Trustee
Guardian or Conservator
Other:



Signer Is Representing: _____

Signer's Name: _____

- Corporate Officer - Title(s):
Individual
Partner - Limited General
Attorney in Fact
Trustee
Guardian or Conservator
Other:



Signer Is Representing: _____

Recording Requested By:

When Recorded Return To:

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT SEWAGE DISPOSAL SYSTEM VESTING CERTIFICATE

Name: CLARK DAVID B
Address: 3141 MATANZAS CREEK LN BEN
APN: 055-150-014
Permit #: VES11-0021

The above site has been reviewed and found to be in compliance with State and County sewage disposal system regulations. This approval will remain valid for the time period noted below. However, new Statewide regulations go into effect January 1, 2004. This certificate or portions of the certificate may become invalid due to the effect of these Statewide regulations.

Pursuant to Sonoma County Code Section 24-56:

- 1. A private sewage disposal permit will be issued for the approved sewage disposal system design if proper application is made and fees are paid prior to 08/14/2014 (three years from date of issuance).
- 2. A clearance to connect to the existing septic system will be approved if proper application is made and fees are paid prior to _____ (two years from date of issuance).
- 3. Proof of water yield per Sonoma County Code 7-12 is required for permit issuance.
- 4. Provide letter authorizing connection to water system.

This certificate will expire and become null and void if proper application for a private sewage disposal permit (box 1 above) or for clearance (box 2 above) is not made within the specified time period. The site will be subject to all regulations in effect upon expiration of a certificate.

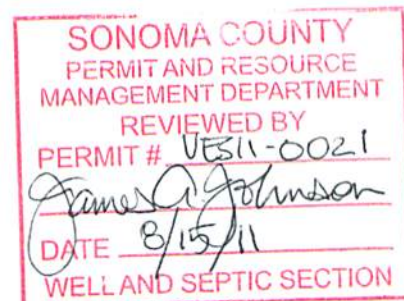
This certificate may be revoked for causes specified in Sonoma County Code Section 24-57.

Date of certificate issuance: 08/15/2011

System type(s): Mound System

Approved number of bedrooms: 5

Approved by:



(Not valid without Department stamp in space at right)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of Sonoma

On August 16, 2011 before me, SCOTT I. HUNSPERGER, NOTARY PUBLIC
(Here insert name and title of the officer)

personally appeared JAMES A. JOHNSON

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 and official seal.

Scott I. Hunsperger
Signature of Notary Public

(Notary Seal)



ADDITIONAL OPTIONAL INFORMATION

INSTRUCTIONS FOR COMPLETING THIS FORM

Any acknowledgment completed in California must contain verbiage exactly as appears above in the notary section or a separate acknowledgment form must be properly completed and attached to that document. The only exception is if a document is to be recorded outside of California. In such instances, any alternative acknowledgment verbiage as may be printed on such a document so long as the verbiage does not require the notary to do something that is illegal for a notary in California (i.e. certifying the authorized capacity of the signer). Please check the document carefully for proper notarial wording and attach this form if required.

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. ~~he~~/she/~~they~~, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

DESCRIPTION OF THE ATTACHED DOCUMENT

Voting Certificate
(Title or description of attached document)

VES11-0021
(Title or description of attached document continued)

Number of Pages _____ Document Date _____

(Additional information)

CAPACITY CLAIMED BY THE SIGNER

- Individual (s)
 Corporate Officer

(Title)

- Partner(s)
 Attorney-in-Fact
 Trustee(s)
 Other _____

Recording Requested By:

When Recorded Return To:

PERMIT AND RESOURCE MANAGEMENT DEPARTMENT

SEWAGE DISPOSAL SYSTEM VESTING CERTIFICATE

Name: CLARK DAVID B
Address: 2121 WELLSRING RD BEN
APN: 055-150-013
Permit #: VES11-0022

The above site has been reviewed and found to be in compliance with State and County sewage disposal system regulations. This approval will remain valid for the time period noted below. However, new Statewide regulations go into effect January 1, 2004. This certificate or portions of the certificate may become invalid due to the effect of these Statewide regulations.

Pursuant to Sonoma County Code Section 24-56:

1. A private sewage disposal permit will be issued for the approved sewage disposal system design if proper application is made and fees are paid prior to 08/14/2014 (three years from date of issuance).
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4. Provide letter authorizing connection to water system.

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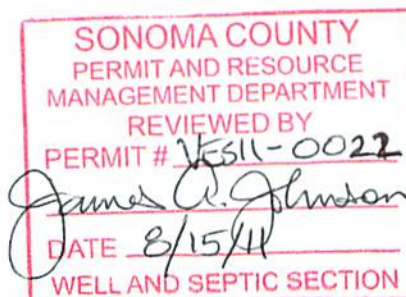
This certificate may be revoked for causes specified in Sonoma County Code Section 24-57.

Date of certificate issuance: 08/15/2011

System type(s): Mound System

Approved number of bedrooms: 5

Approved by:



(Not valid without Department stamp in space at right)

CALIFORNIA ALL-PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

State of California

County of SONOMA

On August 16, 2011 before me, SCOTT I. HUNSPERGER, NOTARY PUBLIC,
(Here insert name and title of the officer)

personally appeared JAMES A. JOHNSON,

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 and official seal.

Scott I. Hunsperger
Signature of Notary Public

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DESCRIPTION OF THE ATTACHED DOCUMENT	
<u>Voting Certificate</u> <small>(Title or description of attached document)</small>	
<u>VES11-0022</u> <small>(Title or description of attached document continued)</small>	
Number of Pages _____	Document Date _____
<small>(Additional information)</small>	

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
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 - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
 - ❖ Indicate title or type of attached document, number of pages and date.
 - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document

CAPACITY CLAIMED BY THE SIGNER	
<input type="checkbox"/> Individual (s)	
<input type="checkbox"/> Corporate Officer	
<small>(Title)</small>	
<input type="checkbox"/> Partner(s)	
<input type="checkbox"/> Attorney-in-Fact	
<input type="checkbox"/> Trustee(s)	
<input type="checkbox"/> Other _____	