

STATE OF INDIANA)
)
COUNTY OF BOONE)

TO HAVE AND TO HOLD said right-of-way and easement unto the Boone County, Indiana and its successors and assigns, the GRANTOR(S) hereby bind(s) itself (themselves), its (their) successors and assigns to warrant and forever defend said conveyance to Boone County, Indiana, its successor: and assigns, against every person whomsoever lawfully claiming the same or any part thereof. GRANTOR(S) covenants and agrees that GRANTOR(S) and GRANTORS' heirs, representatives, successors and assigns shall at no time erect, place or construct, or cause to be erected, placed or constructed in, into, upon, over, across or under any easements or right-of-way granted herein any temporary or permanent structures, and it is further agreed that the Boone County Highway Department shall have the right to remove, excavate or fill upon said permanent easement and right-of-way, any fences, buildings or other obstructions as may now be found upon said permanent easement and right-of-way. It is further intended that the permanent easement and right-of-way herein granted to Boone County, Indiana shall run with the land and forever be a right in and to the land belonging to GRANTOR(S), and GRANTORS' successors and assigns, and said grant is expressly excepted from any right of reversion of said premises under any prior deeds in GRANTORS' chain of title.

The permanent right-of-way and easement rights and privileges granted therein are exclusive, and GRANTOR covenants that it will not convey any other easement or conflicting rights within the area covered by the grant to any other person.

IN WITNESS WHEREOF, this dedication instrument is executed this _____ day of _____, 20____.

BY: _____
GRANTOR (Sign) (Print)

BY: _____
GRANTOR (Sign) (Print)

ACKNOWLEDGEMENT

ACKNOWLEDGEMENT THE STATE OF INDIANA, COUNTY OF _____
BEFORE ME, the undersigned authority in and for _____ County, INDIANA, on this day personally appeared _____ known to me or proved to me through _____ (description of identity card or other document) to be the same person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed and in the capacity therein stated. GIVEN UNDER MY HAND AND SEAL OF OFFICE, this _____ day of _____, 20____.

NOTARY SEAL _____

Notary Public, State of Indiana

Notary's Name (Printed)

Notary's Commission Expires

Project:

Parcel:

Page:

I.C. 8-23-7-31

This Instrument prepared by Robert V. Clutter, Attorney at Law

I affirm under the penalties for perjury that I have taken reasonable care to redact each Social Security number in this document, unless required by law. Robert V. Clutter, Attorney at Law

117 West Main Street
Lebanon, IN 46052

Grantee's Tax & Mailing Address: 116 West Washington Street, Lebanon, IN 46052

The Legal Description and Land Plat prepared by _____.