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## OWNER'S STATEMENT

WE HEREBY STATE THAT WE ARE THE OWNERS OF, OR HAVE AN INTEREST IN THE LAND INCLUDED WITHIN THE COLORED BORDER LINES OF THE ANNEXED MAP AND THAT WE ARE THE ONLY PERSONS WHOSE CONSENT IS NECESSARY TO PASS A CLEAR TITLE TO SAID LAND. WE CONSENT TO THE MAKING AND RECORDATION OF THIS MAP AND SUBDIVISION AS SHOWN THEREON. WE ALSO HEREBY DEDICATE THE EASEMENTS SHOWN HEREON FOR THE PURPOSES SET FORTH.

CHRSTANE M. HENRY, IDA'L. POZZEBON, POZZEBON FAMI

EGENE I. P

DENNIS E. POZZEB

STATE OF CALIFORNIA COUNTY OF SANTA BARBARA

NANCY J. BATTH, C

is a SAID COUNTY AND STATE, PERSONALLY APPEARED TO THE UNDERSIGNED, A NOTARRY PUBLIC IN AND FOR KNOWN TO ME OR 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 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 SAID COUNTY

WITNESS MY HAND AND OFFICIAL SE SIGNATURE: CALL

MY COMMISSION EXPIRES:

PRINCIPAL OFFICE LOCATED IN THE COUNTY OF

STATE OF CALIFORNIA COUNTY OF SANTA BARBARA

SAID COUNTY AND STATE, PERSONALLY APPEARED SAIDS TO BE THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, PERSONALLY APPEARED SAIDS SAIDS TO BE THE PERSON(S) WHOSE NAME(S) IS/ARE SUBSCRIBED TO THE WITHIN INSTRUMENT AND ACKNOWLEDGED TO ME THAT 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 نور INSTRUMENT

O OFFICIAL SE AHA WITNESS MY HAND AND SIGNATURE:

4.15.00 MY COMMISSION EXPIRES: PRINCIPAL OFFICE LOCATED IN THE COUNTY OF: COUNTY OF SANTA BARBARA STATE OF CALIFORNIA

SAID COUNTY AND STATE, PERSONALLY APPEARED COUNTY AND STATE, PERSONAL 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 THAT HE/SHE/THEY EXECUTED THE SAME IN 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.

WITNESS MY HAND AND OFFIC SIGNATURE

Santa PRINCIPAL OFFICE LOCATED IN THE COUNTY OF MY COMMISSION EXPIRES:

STATE OF CALIFORNIA COUNTY OF SANTA BARBARA

SAID COUNTY AND STATE, PERSONALLY APPEARED COUNTY AND STATE, PERSONALLY APPEARED COUNTY AND STATE, PERSONALLY APPEARED COUNTY AND SAID STATE 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.

ORDINANCE AT THE REQUEST OF THE POZZEBON FAMILY TRUST IN JANUARY, 1997. I HEREBY STATE THAT THIS PARCEL MAP SUBSTANTIALLY CONFORMS TO THE APPROVED OR CONDITIONALLY APPROVED TENTATIVE MAP, IF ANY, THAT ALL MONUMENTS ARE OF THE CHARACTER AND OCCUPY

THE POSITIONS INDICATED AND THAT THEY ARE SUFFICIENT TO ENABLE THE SURVEY TO BE

RETRACED

THIS MAP WAS PREPARED BY ME OR UNDER MY DIRECTION AND IS BASED UPON A FIELD SURVEY

STATEMENT

SURVEYOR'S

IN CONFORMANCE WITH THE REQUIREMENTS OF THE SUBDIVISION MAP ACT AND LOCAL

WITNESS MY HAND AND OFFICIAL SIGNATURE:

PRINCIPAL OFFICE LOCATED IN THE COUNTY OF: MY COMMISSION EXPIRES:

STATE OF CALIFORNIA COUNTY OF SANTA BARBARA

Back

STEPHEN K. DAVIS, L.S.5742 LICENSE EXPIRATION DATE: **DECEMBER 31, 2003** 



1-31-00 DATE

## STATEMENT **SURVEYOR'S** COUNTY

I HEREBY STATE THAT I HAVE EXAMINED THIS MAP, THAT THE SUBDIVISION AS SHOWN IS SUBSTANTIALLY THE SAME AS IT APPEARED ON THE TENTATIVE MAP, IF REQUIRED, AND ANY APPROVED ALTERATIONS THEREOF, THAT ALL PROVISIONS OF CHAPTER 2 OF THE SUBDIVISION MAP ACT AND OF ANY LOCAL COUNTY SUBDIVISION ORDINANCES APPLICABLE AT THE TIME OF APPROVAL OF THE TENTATIVE MAP, IF REQUIRED, HAVE BEEN COMPLIED WITH, AND I AM SATISFIED THAT THE MAP IS TECHNICALLY CORRECT.

2 8 00 DATE MICHAEL B. EMMONS

ON 2000, BEFORE ME, THE UNDERSIGNED, A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, PERSONALLY APPEARED KNOWN TO ME OR 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 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.

COUNTY SURVEYOR P.L.S. NO. 5899

1521

P.L.S. NO. 5899 LICENSE EXPIRATION DATE: 31 DECEMBER 2000

## CLERK OF THE BOARD'S STATEMENT:

I, MICHAEL F. BROWN, CLERK OF THE BOARD OF SUPERVISORS OF SANTA BARBARA COUNTY, DO HEREBY STATE THAT PURSUANT TO GOVERNMENT CODE, SECTION 66464 (STATE SUBDIVISION MAP ACT), THAT THE CERTIFICATES AND DEPOSITS REQUIRED UNDER GOVERNMENT CODE, SECTION 66492 AND SECTION 66493, ON THE PROPERTY WITHIN THIS SUBDIVISION HAVE BEEN FILED AND

MICHAEL F. BROWN CLERK OF THE BOARD

2/2/00 Gearna

**ÉEPUTY** 

SAID COUNTY AND STATE, PERSONALLY APPEARED
KNOWN TO ME OR 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 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

PRINCIPAL OFFICE LOCATED IN THE COUNTY OF:

MY COMMISSION EXPIRES:

STATE OF CALIFORNIA COUNTY OF SANTA BARBARA

WITNESS MY HAND AND OFFICIAL SEAL

SIGNATURE:

NAME

RECORDER'S STATEMENT:

FILED THIS // The DAY OF FUBRUARY, 2000, AT 3:30, M. IN BOOK 54 OF PARCEL MAPS, AT PAGES 5/ AND 5.2. AT THE REQUEST OF STEPHEN K. DAVIS, L.S.5742. FILED THIS // M DAY OF

KENNETH A. PETTIT FEE: D/U
COUNTY CLERK-RECORDER-ASSESSOR Brothe FEE \$10 Mores

DEPUTY

PRINCIPAL OFFICE LOCATED IN THE COUNTY OF:

MY COMMISSION EXPIRES:

SIGNATURE OMISSIONS

WITNESS MY HAND AND OFFICIAL SEAL

SKS TORE:

THIS MAP IS SUBJECT TO CERTAIN CONDITIONS AND INFORMATION INCLUDED IN A "NOTICE" AND RECORDED CONCURRENTLY AS INSTRUMENT NO. 2000-0008636 O.R. NOTE:

## MAP NO.14,346 PARCEL

OMITTED PURSUANT TO SECTION 66445(e) OF THE GOVERNMENT CODE (STATE SUBDIVISION MAP THE SIGNATURES OF THE SIGNATURES OF THE FOLLOWING EASEMENT HOLDERS HAVE BEEN

2

UNTY OF SANTA BARBARA, EASEMENT HOLDER FOR ROAD

PURPOSES PER PARCEL MAP BOOK 26, PG 80 &

00

Barbara o'neil, fasement holder for ingress and egres s per Instrument No.6628, book 585,PG.136 O.R. Recorded Aug. 10, 1943 And instrument No.7432, book 529,PG.116 O.R. Recorded Sep. 6,

BEING A DIVISION OF SECTIONS 11 & 14, OF T4N, R26W, S.B & M., IN TORO CANYON, COUNTY OF SANTA BARBARA, STATE OF CALIFORNIA. PRODUCED IN NOVEMBER, 1997 BY

DAVIS LAND SURVEYING SANTA BARBARA, CALIFORNIA L.S. 5742 (805)564-8756 44 HELENA AVENUE

FOR ROAD AND PUBLIC RECORDED MAY 22, 1957

JOHN B. POZZEBON, etux, EASEMENT HOLDER UTILITIES PER INST. 9940, BOOK 1448,PG.40 O.R.

SHEET ONE OF TWO

54 BK