STATE OF WISCONSIN DEPARTMENT OF TRANSPORTATION

I, <SURVEYOR NAME> PROFESSIONAL LAND SURVEYOR, HEREBY CERTIFY THAT IN FULL COMPLIANCE WITH THE PROVISIONS OF SECTION 84.095 OF THE WISCONSIN STATUTES AND UNDER THE DIRECTION OF THE <APPROVING AUTHORITY> I HAVE MAPPED THIS TRANSPORTATION PROJECT PLAT AND SUCH PLAT CORRECTLY REPRESENTS ALL EXTERIOR BOUNDARIES OF THE SURVEYED LAND.

SIGNATURE: \_\_\_\_\_ DATE: XX/XX/XX
PRINT NAME: ENTER APPROPRIATE NAME
REGISTRATION NUMBER: S-XXXX

THIS PLAT AND RELOCATION ORDER ARE APPROVED FOR THE <APPROVING AUTHORITY> <REGION NAME - OFFICE NAME>

SIGNATURE: \_\_\_\_\_ DATE: XX/XX/XX
PRINT NAME: ENTER APPROPRIATE NAME