

GOOD TIMES PARCEL MAP, TRACT 1234

BEING A SUBDIVISION OF _____ (Brief legal description including references to recorded maps and subdivisions) LYING WITHIN THE _____ 1/4 OF SECTION _____ T _____ N, R _____ W, S.B.B. & M. AND CONTAINING _____ ACRES.

OWNERS STATEMENT

(I,WE) THE UNDERSIGNED STATE THAT (I,WE)(AM,ARE) THE OWNERS OF OR HAVE AN INTEREST IN THE LAND INCLUDED WITHIN THIS SUBDIVISION ENTITLED _____ (Subdivision name & tract number) SHOWN ON THIS MAP CONSISTING OF _____ SHEET(S) AND THAT (I,WE)(AM,ARE) THE ONLY PERSON(S) WHOSE CONSENT IS NECESSARY TO PASS A CLEAR TITLE TO SAID LAND. (I,WE) CONSENT TO THE PREPARATION AND RECORDATION OF THIS MAP AND SUBDIVISION AS SHOWN WITHIN THE DISTINCTIVE BORDER LINES (AND DO HEREBY OFFER TO DEDICATE ALL STREETS/EASEMENTS SHOWN FOR THE FOLLOWING PURPOSES SPECIFICALLY IDENTIFIED) (List Street Names) (I, WE) ALSO RESERVE TO OURSELVES, OUR HEIRS, AND ASSIGNS CERTAIN RECIPROCAL ACCESS AND DRAINAGE EASEMENTS FOR THE USE AND BENEFIT OF THE PRESENT OR FUTURE OWNERS OF THE PARCELS AFFECTED BY SUCH EASEMENTS AS DELINEATED ON SAID MAP. (signature) _____ (printed name and title) (repeat for each owner)

NOTARY

STATE OF CALIFORNIA COUNTY OF _____ ON _____, 20____, BEFORE ME, _____ A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, PERSONALLY APPEARED _____

PERSONALLY 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 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.

SIGNATURE _____ NAME PRINTED _____ PRINCIPAL COUNTY OF BUSINESS _____ COMMISSION EXPIRES _____

TRUSTEE STATEMENT

_____ (Name of Trustee) A CALIFORNIA CORPORATION AS TRUSTEE UNDER DEED OF TRUST RECORDED _____, 20____ AS INSTRUMENT NO _____ OF OFFICIAL RECORDS.

NOTARY

STATE OF CALIFORNIA COUNTY OF _____ ON _____, 20____, BEFORE ME, _____ A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, PERSONALLY APPEARED _____

PERSONALLY 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 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.

SIGNATURE _____ NAME PRINTED _____ PRINCIPAL COUNTY OF BUSINESS _____ COMMISSION EXPIRES _____

BENEFICIARY STATEMENT

_____ (Name of Beneficiary) A CALIFORNIA CORPORATION AS BENEFICIARY UNDER DEED OF TRUST RECORDED _____, 20____ AS INSTRUMENT NO _____ OF OFFICIAL RECORDS.

NOTARY

STATE OF CALIFORNIA COUNTY OF _____ ON _____, 20____, BEFORE ME, _____ A NOTARY PUBLIC IN AND FOR SAID COUNTY AND STATE, PERSONALLY APPEARED _____

PERSONALLY 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 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.

SIGNATURE _____ NAME PRINTED _____ PRINCIPAL COUNTY OF BUSINESS _____ COMMISSION EXPIRES _____

SURVEYOR'S (ENGINEER'S) STATEMENT

THIS MAP WAS PREPARED BY ME OR UNDER MY DIRECTION (AND WAS COMPILED FROM RECORD DATA)(AND IS BASED UPON A FIELD SURVEY) IN CONFORMANCE WITH THE REQUIREMENTS OF THE SUBDIVISION MAP ACT AND LOCAL ORDINANCES, AT THE REQUEST OF _____ (Name of person authorizing map) ON (Date). I HEREBY STATE THAT THIS PARCEL MAP SUBSTANTIALLY CONFORMS TO THE APPROVED OR CONDITIONALLY APPROVED TENTATIVE MAP, IF ANY I ALSO STATE THAT ALL MONUMENTS ARE OF THE CHARACTER AND OCCUPY THE POSITIONS INDICATED AND THAT SAID MONUMENTS ARE SUFFICIENT FOR THE SURVEY TO BE RETRACED.

(Signature) _____ (This area is reserved for the surveyor's seal) (Printed name, registration number, and seal are required)

DATE: _____ CITY PLANNING COMMISSION'S CERTIFICATE

THIS IS TO CERTIFY THAT I HAVE EXAMINED THIS SUBDIVISION MAP AND HAVE DETERMINED THAT SAID MAP SUBSTANTIALLY CONFORMS TO THE TENTATIVE MAP AS APPROVED BY THE PLANNING COMMISSION OF THE CITY OF SANTA MARIA ON _____, 20____ AND THE CONDITIONS AS IMPOSED THEREON.

DATE: _____ (SECRETARY) (Printed name)

CITY SURVEYOR'S STATEMENT

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

(Signature) _____ (This area is reserved for the City surveyor's seal) (CITY SURVEYOR)

(Printed name, registration number, and seal are required) DATE: _____

CITY ACCEPTANCE CERTIFICATE (Applicable when dedicating property only.)

I HEREBY CERTIFY THAT ALL STREETS/EASEMENTS/ABANDONMENTS IDENTIFIED AS (Specify easements, List Street Names) SHOWN HEREON ARE ACCEPTED BY THE CITY UPON COMPLETION OF THE PUBLIC IMPROVEMENTS TO THE SATISFACTION OF THE CITY AND THAT THE CITY CLERK WAS DULY AUTHORIZED AND DIRECTED TO THE ENDORSE HEREON ITS APPROVAL OF THE SAME AND ITS ACCEPTANCE OF SAID STREETS/EASEMENTS/ABANDONMENTS.

(Printed name) DATE: _____ CITY CLERK (Printed name)

BOARD OF DIRECTOR'S STATEMENT

I HEREBY CERTIFY THAT THIS MAP WAS APPROVED BY THE BOARD OF DIRECTORS OF SANTA BARBARA COUNTY FLOOD CONTROL AND WATER CONSERVATION DISTRICT ON _____, 20____, AND THE COUNTY CLERK WAS DULY AUTHORIZED AND DIRECTED TO ENDORSE HEREON ITS APPROVAL AND ACCEPTANCE OF THE FLOOD CONTROL EASEMENTS AS SHOWN ON THE ATTACHED MAP.

DATE: _____ (Printed name) CLERK OF THE BOARD OF SUPERVISORS

CLERK OF THE BOARD'S STATEMENT

THE CLERK OF THE BOARD OF SUPERVISORS OF SANTA BARBARA COUNTY, HEREBY STATES, PURSUANT TO GOVERNMENT CODE SECTION 66464 OF THE SUBDIVISION MAP ACT, THAT CERTIFICATES AND DEPOSITS REQUIRED UNDER GOVERNMENT CODE SECTIONS 66492 AND 66493 ON THE PROPERTY WITHIN THIS SUBDIVISION HAVE BEEN FILED AND MADE.

DATE: _____ (Printed name) CLERK OF THE BOARD OF SUPERVISORS

BY: _____ DEPUTY

COUNTY CLERK-RECORDER'S STATEMENT

FILED THIS _____ DAY OF _____, 20____ AT _____ .M. IN BOOK _____ OF PARCEL MAPS, AT PAGE _____, AT THE REQUEST OF _____.

(Printed name) DEPUTY (COUNTY CLERK-RECORDER)

LIST OF DOCUMENTS TO BE RECORDED CONCURRENTLY

Notes

- Overall dimension 18" X 26"
- 1" border at each edge
- Comply with section 66445 of Subdivision Map Act.
- The title shall have a 0.5" min. text height.
- Surveyor or Engineer's title block to be in bottom right corner. Include the Firm's name, address, telephone number, and optional logo.
- Does Subdivision Map Act Section 66477.5 apply? If so, a certificate is needed.
- Does Subdivision Map Act Section 66499.20 1/2 apply? If so, a note on the map is required.
- Does Subdivision Map Act Section 66434.1 apply? If so, a notice is required.
- Statement and Certificate - titles text to be 0.2" high. Statement and Certificate - text to be 0.10" high.
- All recorded documents referred to on this page (i.e. easement holders and mineral holders) need to include the date recorded also.

SIGNATURE OMISSIONS

THE SIGNATURES OF THE FOLLOWING EASEMENT HOLDERS HAVE BEEN OMITTED PURSUANT TO SECTION 66436(a)(3)(A)(i) OF THE GOVERNMENT CODE (STATE SUBDIVISION MAP ACT), AS THEIR INTEREST CANNOT RIPEN INTO FEE:

REV. BY	DATE	APPROVED	DATE

Drawn by: LU DATE DRAWN: 10/24/06 SCALE: NONE SHEET 1 OF 1

THIS IS A COMPUTER GENERATED DRAWING. ALL REVISIONS & CORRECTIONS TO BE COMPLETED ON A CAD-CAM COMPUTER WITH AUTOCAD PROGRAM. FILE NO.: F-972-01E.DWG FILE DISK NO.: DATE OF REVISION: 10-24-06 DATE OF PLOT: 10-24-06