

I, THE UNDERSIGNED, A REGISTERED SANITARIAN IN THE STATE OF TEXAS, HEREBY CERTIFY THAT THIS SUBDIVISION HAS BEEN REVIEWED FOR COMPLIANCE WITH APPLICABLE STATE AND COUNTY REGULATIONS GOVERNING ON-SITE SEWAGES FACILITIES

THE TAX APPRAISAL DISTRICT OF BELL COUNTY DOES HEREBY CERTIFY THERE ARE CURRENTLY NO DELINQUENT TAXES DUE TO

T.B.P.E. FIRM NO.: 14709 T.B.P.L.S. FIRM NO.: 1019411

DRAWING NO.: