

## RELEASE FOR LAWN SPRINKLER SYSTEM IN CITY OF LEE'S SUMMIT RIGHT OF WAY (RESIDENTIAL)

In consideration for the City of Lee's Summit's permission to extend a Lawn Irrigation System into the City's right of way at (legal description of the property):

| Lot No. 157 Plat Title   | Address:                         | 349                        | NW                    | Patch                      | . CA =                 |                               |                                |   |
|--|----------------------------------|----------------------------|-----------------------|----------------------------|------------------------|-------------------------------|--------------------------------|---|
| County:  | _ State:                         | Mo                         |                       |                            |                        |                               |                                |   |
| , Angela Mendenh   | all                              |                            |                       |                            | the u                  | ndersigned,                   | successors, a                  | and assigns do hereb                        |
| release and forever discharge the City or<br>demands for any use arising out of, relating<br>the City's right of way for any purpose wha | g to, or being                   | nit, its emp<br>in any way | loyees a<br>connect   | nd/or ager<br>ed with wo   | nts from<br>rk or serv | and against<br>rice by the Ci | t any and al<br>ity, its emplo | I liability, claims an yees or agents withi |
| NOW THEREFORE, the Undersigned herel release herein and said release shall run wand assigns.   | oy declares t<br>vith the real p | hat said pr<br>oroperty an | operty d<br>d be bin  | ding on all                | parties h              | aving any pa                  | old and con<br>art thereof, t  | veyed subject to the heir heirs, successor  |
| IN WITNESS WHEREOF, this release has bed   | en read, signe                   | and seale<br>Mye<br>Angel  | ed this _<br>lad      | 14 day<br>Ienda<br>endenli | of Ar<br>chalf<br>all  | <u>ril</u><br>0               |                                | 20 <u>75</u>                                |
|  | Pri                              | inted or Typ               | ed Nam                | 2                          | = 2 %                  |                               |                                |   |
|  | INDIVIE                          | DUAL A                     | CKNC                  | WLED                       | GMEN                   | IT                            |                                |   |
| STATE OF MISSOURI<br>COUNTY OF JACKSON   |                                  |                            |                       |                            |                        |                               |                                |   |
| ON THIS, The 14 day of _   | Lpiil                            | all                        |                       | <u>V</u> ≤ befor           | e me,                  | a Notary                      | Public, p                      | ersonally appeared                          |
| proved to me on the basis of satisfaction acknowledged that he/she/th  | tory evidence<br>ey executed t   | e to be th<br>the same fo  | ne perso<br>r the pur | n(s) whose<br>poses state  | e name(s<br>ed therein | ) subscribed<br>and no oth    | d to the wi                    | thin instrument, an                         |
| WITNESS my hand and official seal in the C   | ounty and Sta                    | ate aforesai               | d, the da             | y and year                 | first abov             | ve written.                   |                                |   |
|  | /s/<br>No                        | otary Public               | Signatur              | e                          |                        |                               |                                |   |
| CONNIE J FULLER Notary Public - Notary Seal STATE OF MISSOURI Jackson County My Commission Expires: Aug. 01, 2028                        | Pr                               | inted or Typ               | oed Nam               | e                          | <del></del>            |                               |                                |   |
| (Seal) Commission # 16318493   | M                                | y Commissi                 | on Expire             | es:                        |                        |                               |                                |   |
|  | _                                | Dugl                       | 202                   | 8                          |                        |                               |                                |   |