GOETTL PLACE

A SUBDIVISION OF THE EAST 1/2 LOT 32, LOS OLIVOS AMENDED, BEING A SUBDIVISION OF PART OF THE NE 1/4 SE 1/4 SEC. 32, T. 2 N., R. 3 E., MARICOPA COUNTY, ARIZONA.

SURVEY NO. 451114A BY: HARRY E. JONES.

CERTIFICATE OF SURVEY

This is to certify that the survey and subdivision of the premises as described and platted hereon was made under my direction by W. A. Short during November 1945.

Harry E. Jones
Harry E. Jones,
Registered Civil Engineer.

REGISTD. CIVIL & MINING ENGINEER
CERTIFICATE EXPIRES
HARRY E. JONES
DEC. 31, 1945
ARIZONA, U.S.A.

DEDICATION

STATE OF CALIFORNIA }
COUNTY OF NAPA } S.S.

KNOW ALL MEN BY THESE PRESENTS: That Edward Hoehn, and Faye F. Hoehn, his wife, owners of the East 1/2 of Lot 32, Los Olivos Amended, being a subdivision of part of the NE 1/4 SE 1/4 Sec. 32, T. 2 N., R. 3 E., G. & S. R. M., Maricopa County, Arizona, have caused the premises to be surveyed and subdivided under the name of GOETTL PLACE, and hereby publish this plat as and for the plat of said GOETTL PLACE, and hereby declare that said plat sets forth the location and gives the dimensions of the lots and streets constituting same, and that each lot and street shall be known by the numbers or name given to each respectively on said plat, and we hereby dedicate to the public for use as such the streets and alley shown on said plat and included in the above described premises.

IN WITNESS WHEREOF we have hereunto set our hands and seals this____ day of November 1945.

DIN 59655

_____ Edward Hoehn.

_____ Faye F. Hoehn.

ACKNOWLEDGEMENT

STATE OF CALIFORNIA }
COUNTY OF NAPA } S.S.

The foregoing instrument was acknowledged before me by Edward Hoehn and Faye F. Hoehn for the purpose and consideration therein expressed.

Given under my hand and seal of office this____ day of November 1945.

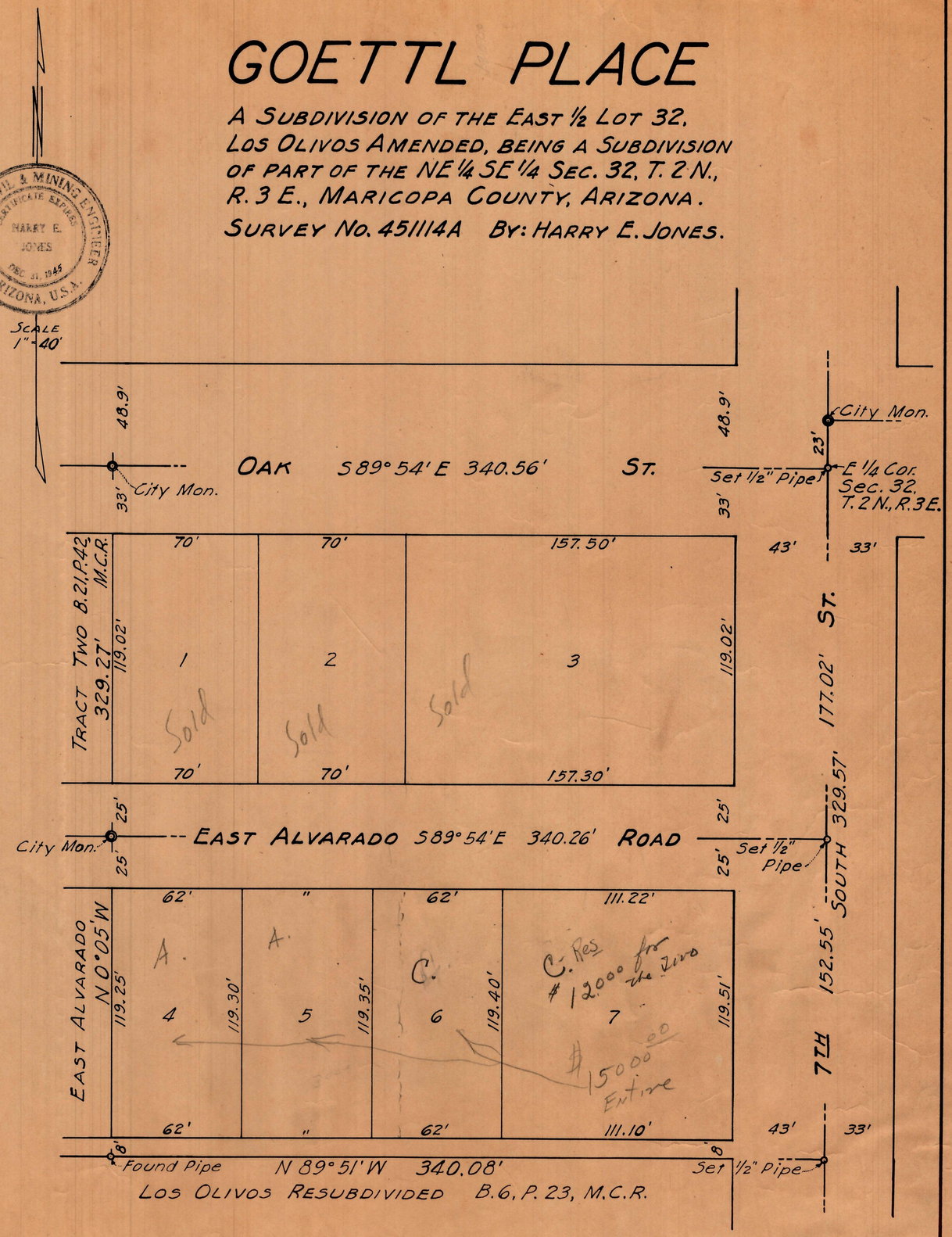
My commission expires_____ _____ Notary Public.

APPROVAL

The subdivision shown hereon has been approved by the Mayor and City Commission of the City of Phoenix, Arizona, this____ day of December 1945.

_____ Mayor.

Attest: _____ Clerk.



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