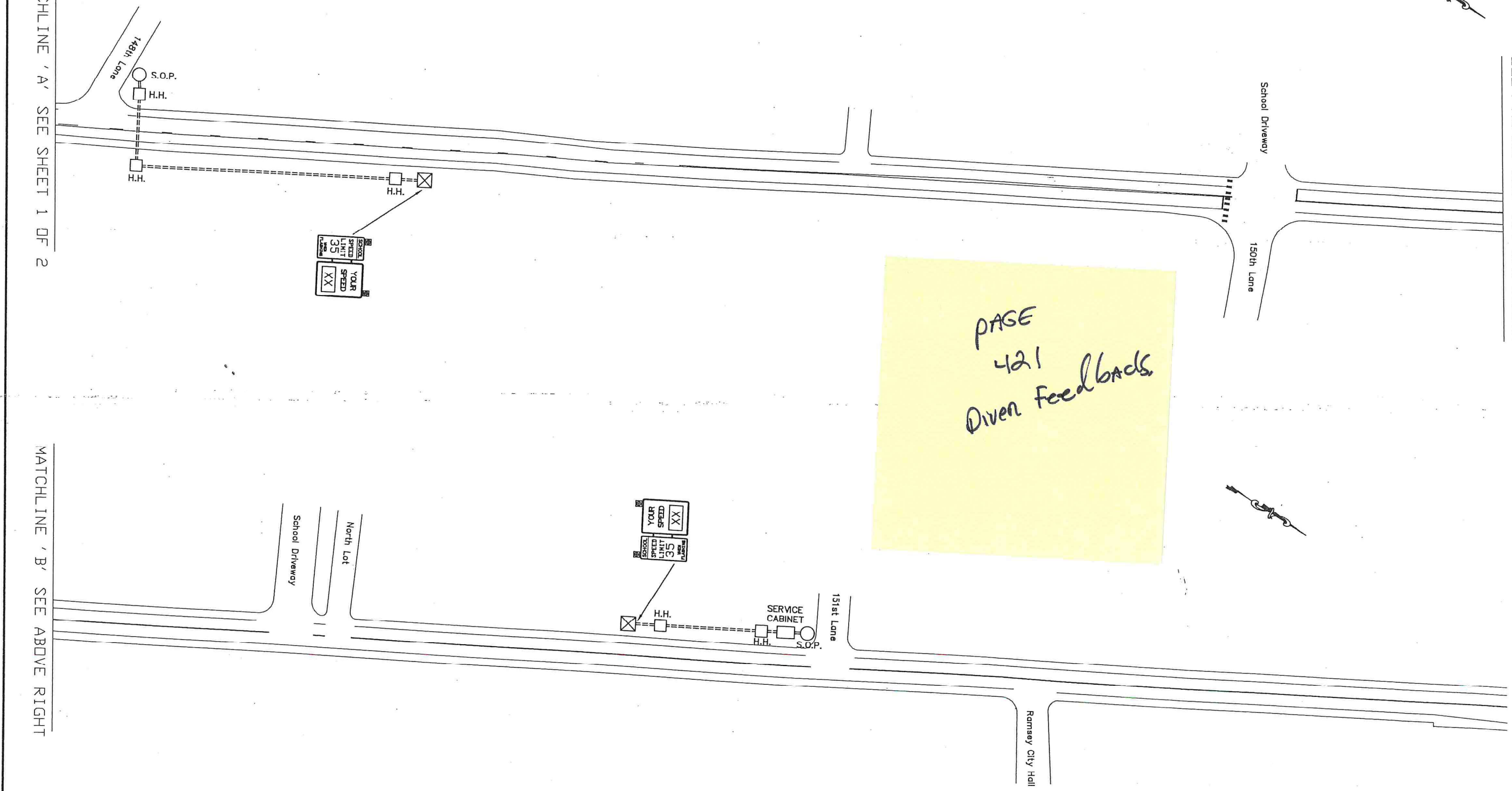


MATCHLINE 'A' SEE SHEET 1 OF 2

MATCHLINE 'B' SEE ABOVE RIGHT

MATCHLINE 'B' SEE BELOW LEFT



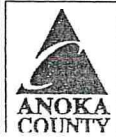
C.S.A.H. 5 NOWTHEN BLVD.
RAMSEY ELEMENTARY

NO	DATE	BY	CKD	APPR	REVISION

I HEREBY CERTIFY THAT THIS PLAN WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION AND THAT I AM A DULY REGISTERED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MINNESOTA.

PRINT NAME: _____
SIGNATURE: _____
DATE: _____ REG. NO. _____

DRAWN BY ST DATE 10/17/05
DESIGN BY DATE
CHECKED BY DATE



ANOKA COUNTY
HIGHWAY DEPT.

STATE PROJECT NO. _____
STATE AID PROJECT NO. _____
COUNTY PROJECT NO. _____

D.F.B. SIGN
S.O.P. LAYOUT