

RESTRICTIONS



9 1 2 1 6 1 4
Tx:8838116

**KRISTI CHLEBOWSKI
DANE COUNTY
REGISTER OF DEEDS**

**DOCUMENT #
5311579**

03/13/2017 1:19 PM

Trans. Fee:

Exempt #:

Rec. Fee: 30.00

Pages: 2

Recording area

Name and return address:

JAMES SCHMIDT
1788 LEON LANE
DEERFIELD WI 53531

07112439040-4
07112439010-0

PARCEL IDENTIFICATION NUMBER(S)

Use black ink & print legibly

WHEREAS, JAMES SCHMIDT &
MARY WICK

is/are owner(s) of the following described real estate in the

Town of COTTAGE GROVE in Dane County, further described

as follows:

(Use reverse side if more space is needed for the complete property description.)

Legal Description:

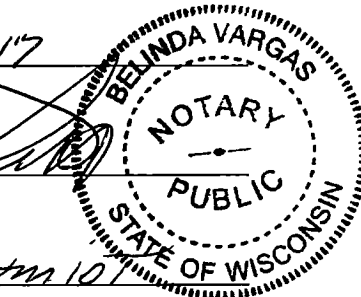
Lot 2 and 3 of Certified Survey Map #4395, part of the Southwest ¼ of the
Southwest ¼ of Section 24, T7N, R11E, Town of Cottage Grove, Dane County,
Wisconsin

WHEREAS, said owner(s) desire(s) to place certain restrictions on the above-said real estate, to bind the owner(s) and those who may acquire title hereafter.

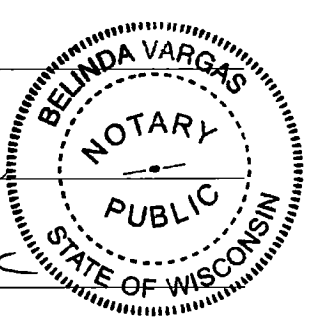
THEREFORE, the following restrictions are hereby imposed:

1. The above-described lands are combined into a single parcel for all purposes including, but not limited to, meeting zoning requirements.
2. After recording of this document, the above-described lands may not thereafter be divided without the express written consent of both the County of Dane and the Town(s) in which the lands are located.
3. These restrictions are enforceable jointly and severally by the County of Dane and the Town(s) in which the subject lands are located.
4. These restrictions are binding on the owner's successors and assigns in perpetuity and that the restrictions otherwise run with the land.
5. These restrictions or any of the provisions thereof may not be amended, modified or repealed without the express written consent of both the County of Dane and the Town(s) in which the subject lands are located.

Date March 13, 2017 _____ Date _____
 Signature of Grantor (owner) [Signature] _____ Signature of Grantor (owner) _____
 *Name printed James E. Schmidt _____ *Name printed _____



Date 3/13/17 _____ Date _____
 Signature of Grantor (owner) [Signature] _____ Signature of Grantor (owner) _____
 *Name printed MARY K. Wick _____ *Name printed _____



This document was drafted by: (print or type name below)

JAMES SCHMIDT

*Names of persons signing in any capacity must be typed or printed below their signature. P&D form 12/05/2006

STATE OF WISCONSIN, County of Dane

Subscribed and sworn to before me on March 13, 2017 by the above named person(s).

Signature of notary or other person authorized to administer an oath (as per s. 706.06, 706.07) Belinda Vargas

Print or type name: Belinda Vargas

Title Financial Specialist Date commission expires: 04/13/19