

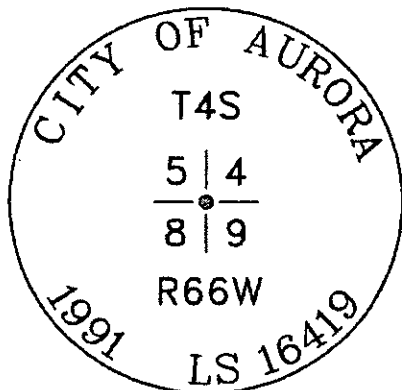
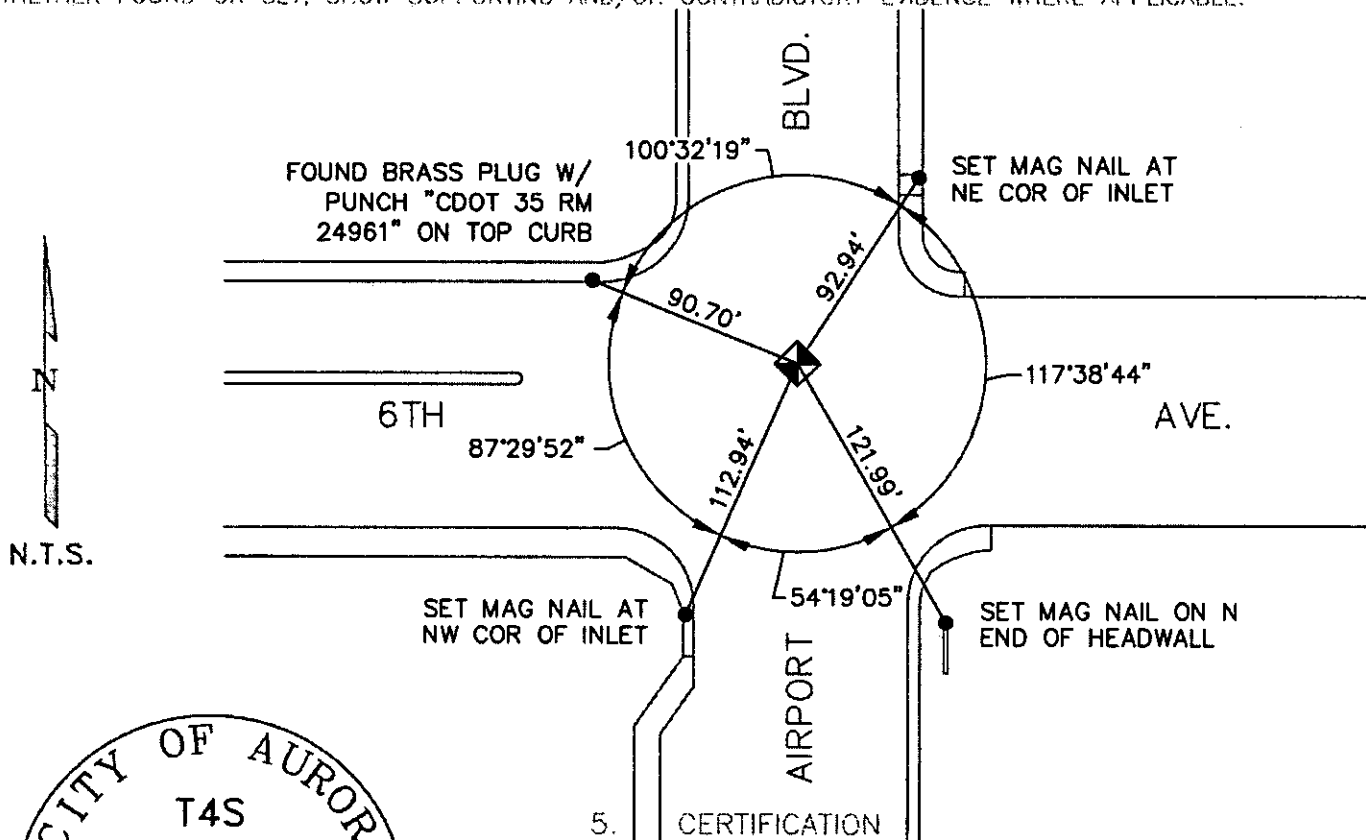
# COLORADO LAND SURVEY MONUMENT RECORD

Department of Regulatory Agencies  
Board of Licensure for Architects, Professional Engineers and Professional Land Surveyors  
1560 Broadway, Suite 1350  
Denver, CO 80202  
Phone (303) 894-7800; Fax (303) 894-2310; EMAIL [aes@dora.state.co.us](mailto:aes@dora.state.co.us); V/TDD 711

**OFFICE**  
**MAY 24 2017**  
**COLO. ST. BD. OF LIC.**  
**FOR AES**

Report one monument only on this form - Reproduction of this form is authorized. All items are to be filled in by the Land Surveyor using **PERMANENT BLACK LETTERING** and lines which can be reproduced.

1. TYPE OF MONUMENT: ☒ SECTION CORNER ☐ QUARTER CORNER ☐ SIXTEENTH CORNER ☐ OTHER \_\_\_\_\_
2. DESCRIPTION AND DATE OF MONUMENT FOUND:  
**FOUND 3" BRASS CAP 0.6' BELOW THE SURFACE IN RANGE BOX ON 5/12/17**
3. DESCRIPTION OF MONUMENT SET BY YOU TO PERPETUATE THE LOCATION OF THIS POINT:
4. SKETCH SHOWING RELATIVE LOCATION OF MONUMENT, ACCESSORIES AND REFERENCE POINTS STATING WHETHER FOUND OR SET, SHOW SUPPORTING AND/OR CONTRADICTORY EVIDENCE WHERE APPLICABLE:



Stamping on Cap

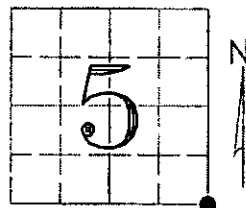
## 5. CERTIFICATION

This is to certify that I was in responsible charge of the surveying work described in this record and that to the best of my knowledge the information presented herein is true and correct.

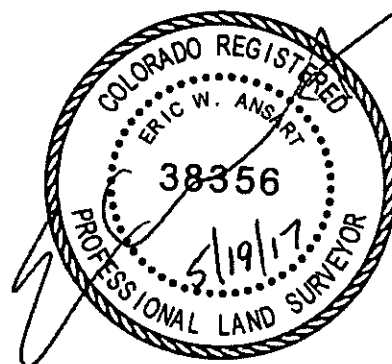
Name (Please Print): ERIC W. ANSART  
Firm Name: CITY OF AURORA  
Firm Address: 13636 E. ELLSWORTH AVE.  
AURORA, COLORADO 80012  
Phone: 303-326-8015

## 6. LOCATION DIAGRAM

1" = 1 Mile



○ = Location of Monument



Signature/Date through Seal

7. SEC 5 T 4S R 66W 6TH P.M.  
COUNTY ARAPAHOE INDEX REF NUMBER 09V

\*\*8. SEC \_\_\_\_\_ T \_\_\_\_\_ R \_\_\_\_\_ P.M.  
COUNTY \_\_\_\_\_ INDEX REF NUMBER \_\_\_\_\_

\*\* To be used only for monuments located on county lines

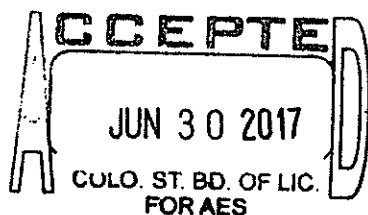


**DORA**  
Department of Regulatory Agencies

Rev.02/01/2011

- a. Date of field Work to Establish, Restore or Rehabilitate Monument: MAY 12, 2017
- b. Date Monument was used as a Control corner: \_\_\_\_\_

(Surveyor, do not fill in)



RECEIVED AT OFFICE OF THE COUNTY CLERK  
\_\_\_\_\_ COUNTY

BY: \_\_\_\_\_

DATE: \_\_\_\_\_

Record to be filed numerically by Index Reference Number, then alphabetically by letter in the index reference number, then under appropriate Township, Range, and Meridian.