

Town of Lexington Planning Office

Land Use, Health and Development Department 1625 Massachusetts Avenue Lexington, MA 02420

Tel: (781) 698-4560

FORM G-CE

DESIGNER'S CERTIFICATE CIVIL ENGINEER

		AUGUST 9, 2021
		(date)
To the Planning Board:		
Assessor's map and lot #:	14-57	
Development application type:	SKETCH PLAN R	ESIDENTIAL SUBDIVISION
I hereby certify that: (Please fill in the	ne relevant blanks.)	
1. the accompanying plan, entitled	l:SKETCH SUBD	IVISON PLAN SET
and dated AUGUST 9, 2021 Rules and Regulations of the Lo	, is true and exington Planning Bo	correct to the accuracy required by the pard;
		pproved definitive subdivision plan, any and the Standard Specifications;
3. other:		
Identifying information of Civil Eng	gineer:	
MICHAEL NOVAK		Space for Professional Registration Stamp
Civil Engineer	_	Registration Stamp
35 BEDFORD ST SUITE 4		MICHAEL J.
LEXINGTON, MA 02420	_	NOVAK CIVIL No. 50696
Address		A SECULERO SE
978-726-2654		M SCOMAL SCOTO
Phone	_	