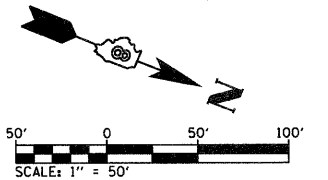
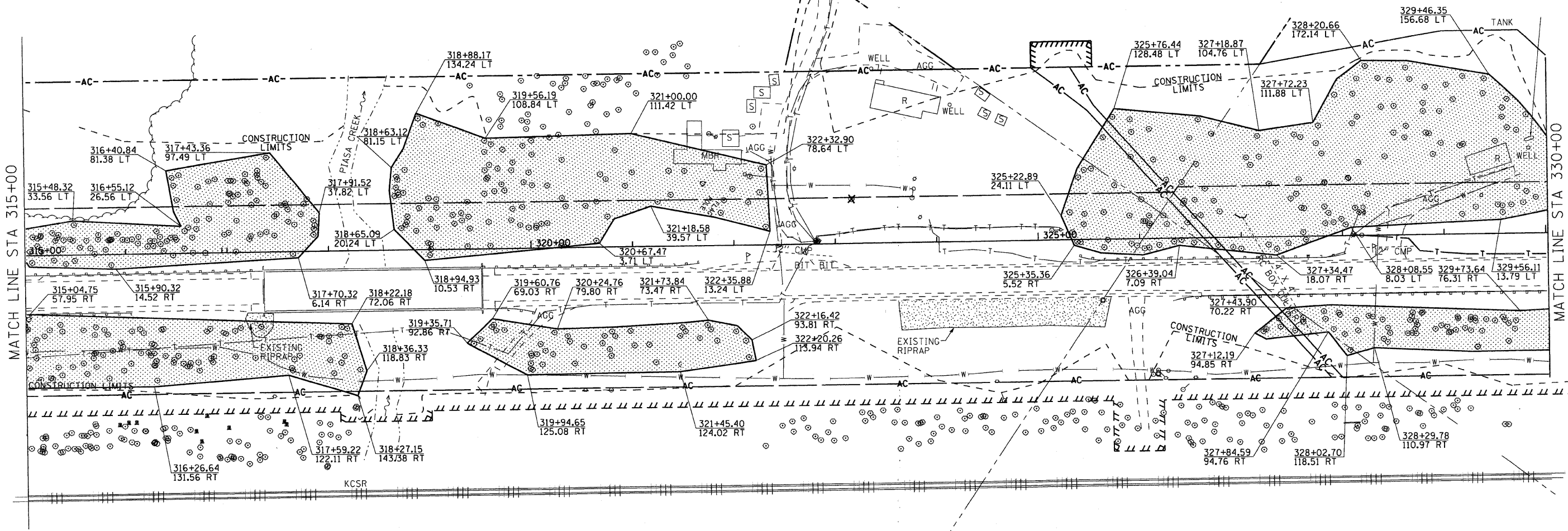




PLAN	SURVEYED	DATE
NOTE BOOK	PLOTTED	
NO.	RT. OF WAY CHECKED	
	NO. _____	
	PAID FILE NAME	



 TREE REMOVAL, ACRES  
 TREE REMOVAL (EACH)

REVISIONS	
NAME	DATE

ILLINOIS DEPARTMENT OF TRANSPORTATION  
**TREE REMOVAL STA 315+00 TO 330+00**  
 FAP ROUTE 310  
 SECTION 60-16-1&1B,42-1&1B  
 MADISON/JERSEY COUNTY  
 DRAWN BY: EMR      CHECKED BY: GLF