

# AMENDED PLAT OF LOT 2A OF AMENDED PLAT OF LOTS 2 AND 3, BLOCK 4, ST. VINCENT HEALTHCARE SUBDIVISION

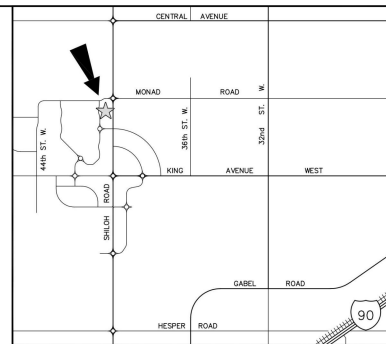
SITUATED IN THE SE1/4 OF SECTION 10, T. 1 S., R. 25 E., P.M.M.  
IN THE CITY OF BILLINGS, YELLOWSTONE COUNTY, MONTANA

PREPARED FOR : SCL HEALTH

OCTOBER 2021

PREPARED BY : SANDERSON STEWART

BILLINGS, MONTANA



VICINITY MAP  
NOT TO SCALE



SCALE: 1" = 50'

BASIS OF BEARING: AMENDED PLAT OF LOTS 2 AND 3, BLOCK 4, ST. VINCENT HEALTHCARE SUBDIVISION

- FOUND SURVEY MONUMENT, REBAR & CAP MARKED "SANDERSON STEWART", OR AS NOTED.
- SET 5/8" X 18" REBAR WITH CAP MARKED WITH THE LICENSE NUMBER OF THE UNDERSIGNED LAND SURVEYOR AND "SANDERSON STEWART".

NOTE: ALL CURVES ARE TANGENT AND ALL PROPERTY LINES INTERSECTING CURVES ARE RADIAL UNLESS OTHERWISE NOTED.

### CERTIFICATE OF DEDICATION

STATE OF MONTANA )  
County of Yellowstone ) ss

KNOW ALL MEN BY THESE PRESENTS: That the undersigned owner of the following described tract of land does hereby certify that they have caused to be surveyed, subdivided and platted into lots, blocks and streets as shown on the annexed plat, said tract being situated in the SE1/4 of Section 10, T. 1 S., R. 25 E., P.M.M., in the City of Billings, Yellowstone County, Montana, said tract being more particularly described as follows, to-wit:

Lot 2A of the Amended Plat of Lots 2 and 3, Block 4, St. Vincent Healthcare Subdivision, according to the official plat on file in the Office of the Clerk and Recorder of Yellowstone County, Montana, under Document No. 3945335.

The park requirement for this subdivision has been previously met.

Said tract to be known and designated as AMENDED PLAT OF LOT 2A OF AMENDED PLAT OF LOTS 2 AND 3, BLOCK 4, ST. VINCENT HEALTHCARE SUBDIVISION

SISTERS OF CHARITY OF LEAVENWORTH HEALTH SYSTEM INC.,  
a Kansas nonprofit corporation

By: \_\_\_\_\_

Title: \_\_\_\_\_

STATE OF \_\_\_\_\_ )  
County of \_\_\_\_\_ ) ss

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned Notary Public for the State of \_\_\_\_\_, personally appeared \_\_\_\_\_, known to me to be the person who signed the foregoing instrument as \_\_\_\_\_ of Sisters of Charity of Leavenworth Health System Inc., and who acknowledged to me that said corporation executed the same. Witness my hand and seal the day and year herein above written.

Notary Public in and for the State of \_\_\_\_\_

### CERTIFICATE OF SURVEYOR

STATE OF MONTANA )  
County of Yellowstone ) ss

The undersigned, a Land Surveyor licensed in the State of Montana, states that during the month of October, 2021, a survey was performed under his supervision of a tract of land to be known as AMENDED PLAT OF LOT 2A OF AMENDED PLAT OF LOTS 2 AND 3, BLOCK 4, ST. VINCENT HEALTHCARE SUBDIVISION in accordance with the request of the owner thereof and in conformance with the Montana Subdivision and Platting Act; said subdivision, description of boundaries and dimensions being in accordance with the Certificate of Dedication and as shown on the annexed plat; that the monuments found and set are of the character and occupy the positions shown hereon and that the gross area and the net area is 125,120 Sq. Ft. (2,873 acres), more or less.

SANDERSON STEWART

By: \_\_\_\_\_

Montana License No. \_\_\_\_\_

Date: \_\_\_\_\_

### CERTIFICATE OF APPROVAL: CITY COUNCIL

STATE OF MONTANA )  
County of Yellowstone ) ss

We hereby certify that I have examined the annexed and foregoing AMENDED PLAT OF LOT 2A OF AMENDED PLAT OF LOTS 2 AND 3, BLOCK 4, ST. VINCENT HEALTHCARE SUBDIVISION and find that said plat conforms with the requirements of the laws of the State of Montana, and the requirements of the Yellowstone County Board of Planning. It is therefore approved and the dedication to public use of any and all lands shown on this plat as being dedicated to such use are accepted.

IN WITNESS WHEREOF, we have set our hands and the seal of the CITY OF BILLINGS, MONTANA, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

CITY OF BILLINGS, MONTANA

By: \_\_\_\_\_ Mayor Attest: \_\_\_\_\_ City Clerk

### CERTIFICATE OF CITY ENGINEER'S OFFICE

I hereby certify that annexed and foregoing plat conforms with Section 76-4-125(1)(g), M.C.A., for divisions located within jurisdictional areas that have adopted growth policies pursuant to chapter 11 or within first-class or second-class municipalities for which the governing body certifies, pursuant to 76-4-127, that adequate storm water drainage and adequate municipal facilities will be provided.

IN WITNESS WHEREOF, I have executed this CERTIFICATE OF APPROVAL this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

City Engineer's Office

### NOTICE OF APPROVAL

STATE OF MONTANA )  
County of Yellowstone ) ss

This plat has been approved for filing by the Yellowstone County Board of Planning and conforms to the recommendations of this board.

Date: \_\_\_\_\_ President: \_\_\_\_\_

Executive Secretary: \_\_\_\_\_

### CERTIFICATE OF CITY ATTORNEY

This document has been reviewed by the City Attorney's office and is acceptable as to form.

Date: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

### ERRORS AND OMISSIONS REVIEW

I hereby certify that I have examined the annexed and foregoing plat for errors and omissions in computations and drafting and find that said plat conforms with the requirements of the laws of the State of Montana, and that said plat conforms to the adjoining additions and plats of the City of Billings already platted as nearly as circumstances will permit.

Examining Land Surveyor: \_\_\_\_\_ Date: \_\_\_\_\_

### CERTIFICATE OF COUNTY TREASURER

I hereby certify that all real property taxes and special assessments have been paid per 76-3-611(3)(b)/76-3-207(3), M.C.A.

Date: \_\_\_\_\_ Yellowstone County Treasurer: \_\_\_\_\_

By: \_\_\_\_\_ Deputy: \_\_\_\_\_

### SUBDIVISION IMPROVEMENTS AGREEMENT

Document No.: \_\_\_\_\_

RESERVED FOR CLERK AND RECORDER