

DESIGNED BY: \_\_\_\_\_ CHECKED BY: \_\_\_\_\_  
 ###

REVISIONS	
NO.	DESCRIPTION

I HEREBY CERTIFY THAT THIS PLAN WAS PREPARED BY ME OR UNDER MY DIRECT SUPERVISION AND THAT I AM A DULY LICENSED PROFESSIONAL ENGINEER UNDER THE LAWS OF THE STATE OF MINNESOTA.

DATE: ###/###/### LIC. NO. ###

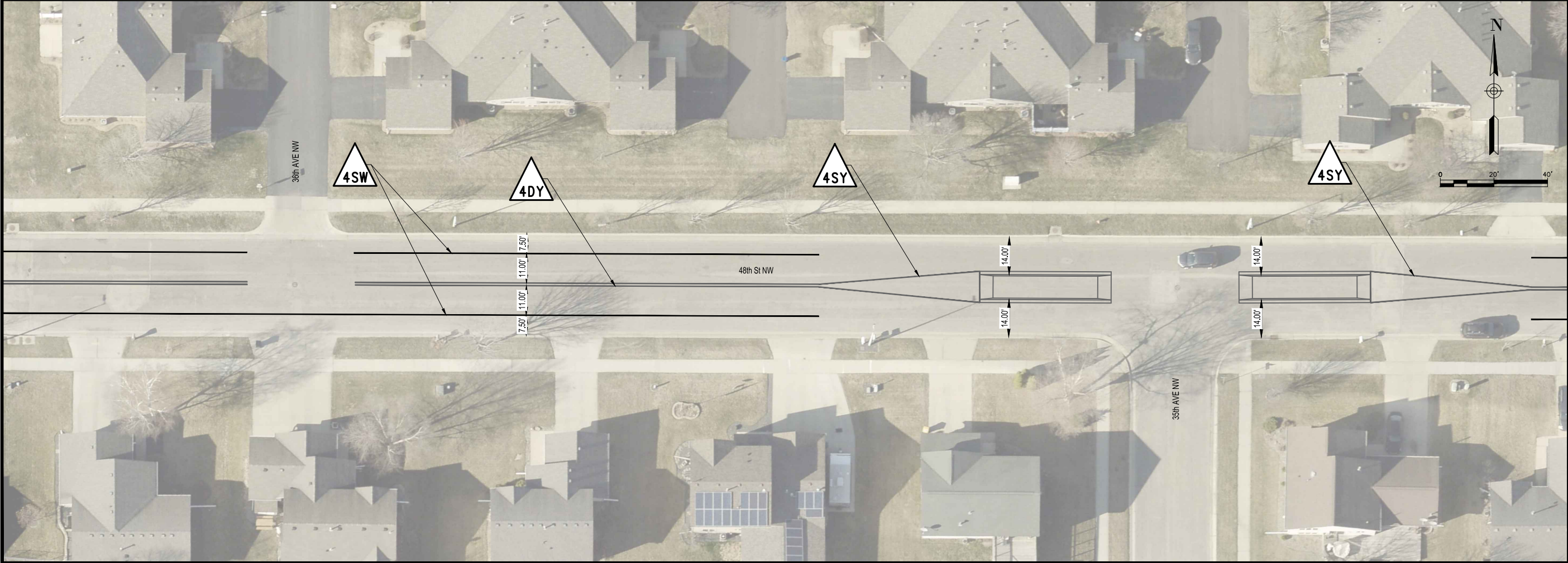
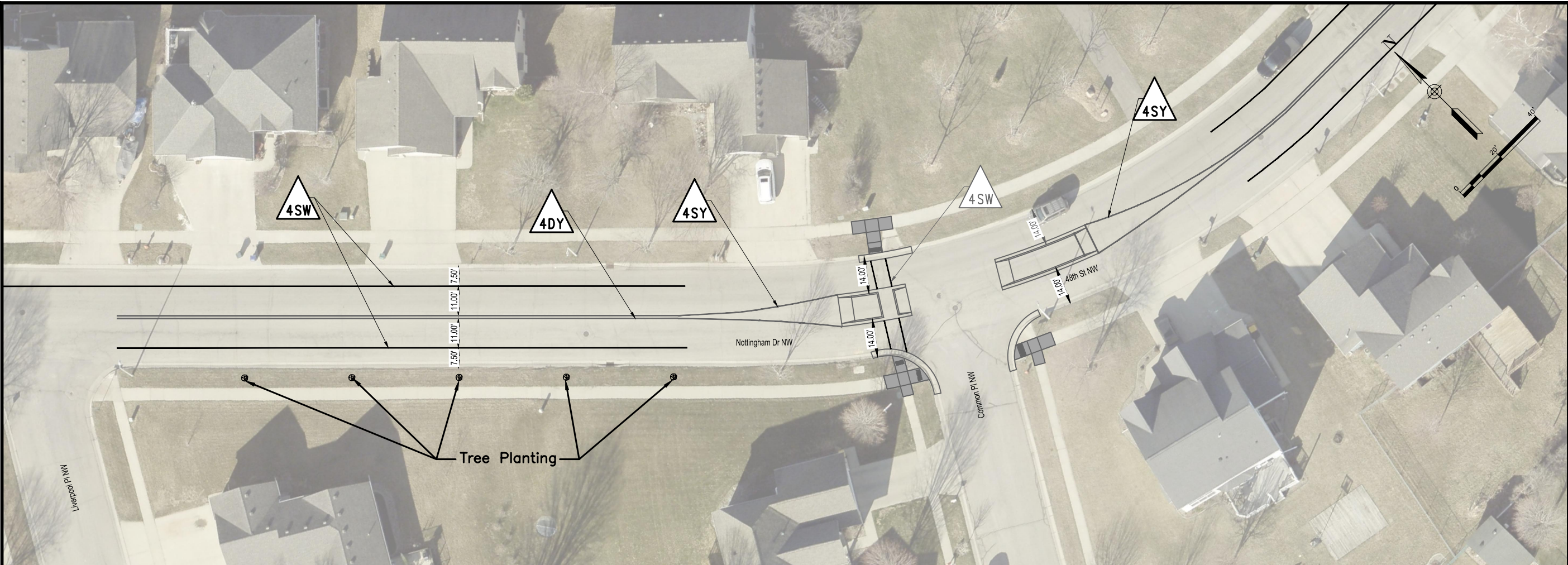
**Option 3 - Striping with Medians**

Lincolnshire  
 CITY OF ROCHESTER,  
 MINNESOTA

CITY PROJECT NO. ### SP PROJECT NO. ###

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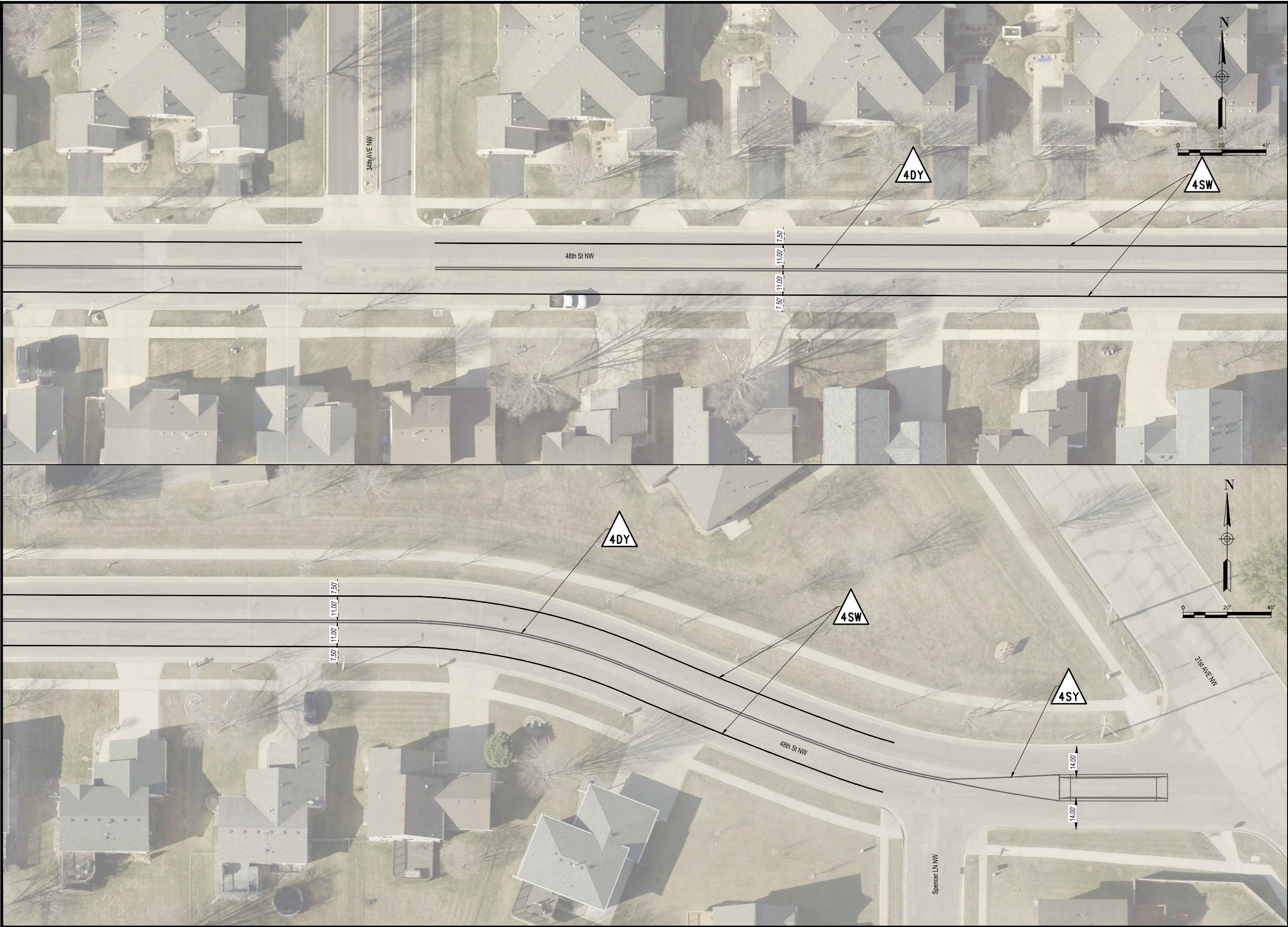
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