

Appendix N

REVISION TO PLAT

Name of Subdivision: SILVER LAKES RANCH

Recorded in Volume \_\_\_\_\_, Page \_\_\_\_\_ of the Real Property Records of Montague County, Texas

Commissioner Precinct No.: 2

Owner/subdivider/developer: MARTIN AND MELISSA WESLEY

Owner/subdivider/developer's Mailing Address: 9 ROYAL OAKS BLVD HICKORY CREEK, TX 75065

Owner/subdivider/developer's Phone Number(s): 469 553-7289

Lots or Tracts to be revised (include Unit, Section or Phase # if applicable): LOTS 227 / 228

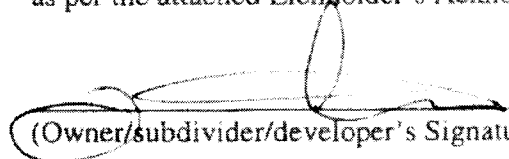
Resulting Lot Number to be Known As: \_\_\_\_\_

Lienholder: \_\_\_\_\_ Yes  No

If yes, Name of Lienholder: \_\_\_\_\_  
(Attach Lienholder's Acknowledgement, Appendix K)

**IF REVISED PLAT INCLUDES ANY CHANGES TO AN EXISTING UTILITY EASEMENT, RELEASE OF SAID EASEMENTS BY THE UTILITY PROVIDERS IS REQUIRED BEFORE APPROVAL OR FILING OF SAID PLAT.**

The signature affixed below will certify that the owner/subdivider/developer of the described property does hereby request to revise the plat of the property. The owner/subdivider/developer certifies that any and all lienholders have acknowledged this revision as per the attached Lienholder's Acknowledgement, if applicable.

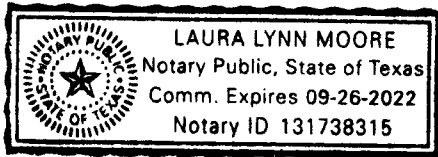
  
(Owner/subdivider/developer's Signature)

MARTIN WESLEY  
(Printed name)

THE STATE OF TEXAS       §  
  §  
COUNTY OF MONTAGUE     §

SWORN TO AND SUBSCRIBED before me by \_\_\_\_\_

\_\_\_\_\_ on the 13<sup>th</sup> day of July, 2020.



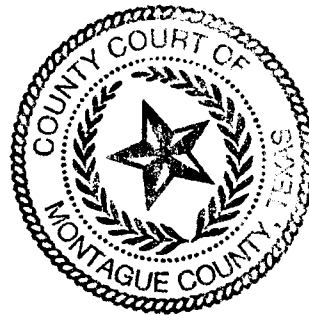
Laura Lynn Moore

Notary Public in and for  
The State of Texas

APPROVED BY COMMISSIONERS COURT ON THE 13<sup>th</sup> DAY OF July,  
2020.

[Signature]  
MONTAGUE COUNTY JUDGE

ATTEST: Glenda Henson  
MONTAGUE COUNTY CLERK





Montague County Treasurer  
 P.o. Box 186  
 Montague Texas 76251-0186

Receipt Number: R00000547

Cashier Name: Billie Otto  
 Terminal Number: 4

Receipt Date: 7/6/2020 3:33:37 PM

Tran. Code: Plat Fees - Plat Fees	Name: MONTAGUE CO. TREASURER	\$300.00
Plat Fees		\$300.00
Payment Method: Check	Payor: MELISSA WESLEY	Reference: 128
	<b>Total Amount Applied:</b>	\$300.00
	Amount:	\$300.00
	<b>Total Payment Received:</b>	\$300.00
	<b>Change:</b>	\$0.00

GL Distribution:	<u>Account Number</u>	<u>Account Name</u>	<u>Amount</u>
	010-370-499	PLAT FEES	300.00
		<b>Total Distribution Amount:</b>	300.00

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