

PROPOSED BOUNDARY MAP

COMMUNITY FACILITIES DISTRICT NO. 2025-2 (SAGECREST)

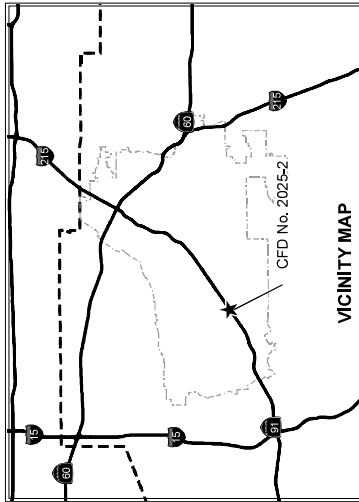
CITY OF RIVERSIDE, STATE OF CALIFORNIA

I HEREBY CERTIFY THAT THE WITHIN MAP SHOWING PROPOSED BOUNDARIES OF COMMUNITY FACILITIES DISTRICT NO. 2025-2 (SAGECREST), CITY OF RIVERSIDE, COUNTY OF RIVERSIDE, STATE OF CALIFORNIA, WAS APPROVED BY THE CITY COUNCIL OF THE CITY OF RIVERSIDE, COUNTY OF RIVERSIDE, AT A REGULAR MEETING THEREOF, HELD ON THE ____ DAY OF ____, 20____, BY RESOLUTION NO. _____

CITY CLERK
CITY OF RIVERSIDE

FILED IN THE OFFICE OF THE CITY CLERK, CITY OF RIVERSIDE THIS ____ DAY OF ____, 20____.

CITY CLERK
CITY OF RIVERSIDE



LEGEND

- ____ PROPOSED CFD BOUNDARY
- ____ CITY BOUNDARY
- ____ PARCEL LINES
- XXXXXXXXX ASSESSOR PARCEL NUMBER

THIS BOUNDARY MAP CORRECTLY SHOWS THE BOUNDARIES OF THE COMMUNITY FACILITIES DISTRICT. FOR DETAILS CONCERNING THE LINES AND DIMENSIONS OF LOTS OR PARCELS REFER TO THE COUNTY ASSESSOR'S MAPS FOR FISCAL YEAR 2025-26.



RECORDED THIS ____ DAY OF ____, 20____ AT THE HOUR OF ____ O'CLOCK ____ M. IN BOOK PAGE ____ OF ASSESSMENT AND COMMUNITY FACILITIES DISTRICTS IN THE OFFICE OF THE COUNTY RECORDER, IN THE COUNTY OF RIVERSIDE, STATE OF CALIFORNIA.

FEE: _____ NO.: _____
PETER ALDANA, ASSESSOR, COUNTY CLERK, RECORDER
BY: _____ DEPUTY

APN LIST
234-140-018
234-140-019
234-150-046

