

**Lee County Board Of County Commissioners  
Agenda Item Summary**

**Blue Sheet No. 20070619-UTL**

**1. ACTION REQUESTED/PURPOSE:**

Developer Contributed Asset: Approve final acceptance, by Resolution and recording of one (1) utility easement, as a donation of one 6" diameter fire line, one 2" diameter water service and one sewer service connection, to provide potable water service, fire protection and sewer service to *HealthPark Florida – OB/GYN Office*, a recently construction medical office. This is a Developer contributed asset and the project is located on the south side of Park Royal Drive approximately ¼ mile north of Summerlin Road.

**2. FUNDING SOURCE:**

No funds required.

**3. WHAT ACTION ACCOMPLISHES:**

Provides adequate utility infrastructure to support development of the subject property and complies with the Lee County Utilities Operations Manual.

**4. MANAGEMENT RECOMMENDATION:** Approval.

**5. Departmental Category:** 10 - Utilities

*C10L*

**6. Meeting Date:** MAY 01 2007

**7. Agenda:**

- Consent
- Administrative
- Appeals
- Public
- Walk-On

**8. Requirement/Purpose: (specify)**

- Statute
- Ordinance
- Admin. Code
- Other Approval

**9. Request Initiated:**

Commissioner \_\_\_\_\_  
 Department Public Works  
 Division Utilities  
 By: *Douglas J. Meurer 4/12/07*  
**Douglas J. Meurer, P.E., Director**

**10. Background:**

Fire lines, single water services, and single sewer services do not require permission to construct by the Board, therefore, no previous Blue Sheet number is provided.  
 The installation has been inspected for conformance to the Lee County Utilities Operations Manual. Satisfactory pressure and bacteriological testing has been completed.  
 Record drawings have been received.  
 Engineer's Certification of Completion has been provided—copy attached.  
 Project Location Map—copy attached.  
 Warranty has been provided—copy attached.  
 Waiver of Lien has been provided—copy attached.  
 Certification of Contributed Assets has been provided—copy attached.  
 100% of the connection fees have been paid.  
 Funds are available for recording fees in: Account No. OD5360748700.504930  
 (Util-Util Eng-Dep Clerk Fees for Recording & Filing)

SECTION 04    TOWNSHIP 46S    RANGE 24E    DISTRICT # 3    COMMISSIONER JUDAH

**11. Review for Scheduling:**

Department Director	Purchasing or Contracts	Human Res.	Other	County Attorney	Budget Services				County Manager/P.W. Director
					Analyst	Risk	Grants	Mgr.	
<i>J. Lavender</i> Date: <i>4-16-07</i>	N/A Date:	N/A Date:	<i>P.O.</i> T. Osterhout Date: <i>4/12</i>	<i>S. Coovert</i> S. Coovert Date: <i>4/16/07</i>	<i>RK</i> 4/17	<i>MR</i> 4/12/07	<i>MR</i> 4/17/07	<i>MR</i> 4/17/07	<i>J. Lavender</i> Date: <i>4/16-07</i>

**12. Commission Action:**

- Approved
- Deferred
- Denied
- Other

RECEIVED BY  
 COUNTY ADMIN: *PR*  
*4-17-07*  
*10 AM*  
 COUNTY ADMIN  
 FORWARDED TO: *PR*  
*4-18-07*  
*11:5 AM*

Rec. by CoAtty  
 Date: *4/16/07*  
 Time: *4:00 pm*  
 Forwarded To:  
*4/17/07*  
*8:45 am*

RESOLUTION NO.

RESOLUTION ESTABLISHING UTILITY ACCEPTANCE OF  
DEVELOPER CONTRIBUTED ASSETS  
IN LEE COUNTY, FLORIDA

WHEREAS, it is the desire of "OB/GYN REALTY GROUP, LLP" owner of record, to make a contribution to Lee County Utilities of water facilities (one 6" diameter fire line, one 2" diameter water service), and sewer facilities (one sewer service connection), serving "HEALTHPARK FLORIDA-OB/GYN OFFICE"; and,

WHEREAS, Lee County Utilities requires proof of a Release of Lien, a Warranty (one-year) on all labor and materials, an accurate value of contributed assets, and right-of-way and/or easement-indemnity granted for all systems being contributed to Lee County Utilities; and,

WHEREAS, all of the above information has been received and approved as complete by Lee County Utilities; and,

WHEREAS, Lee County Utilities has recommended to the Board of County Commissioners that the above-named system be accepted for ownership, operation, and maintenance.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF LEE COUNTY, FLORIDA, that the above facilities, for a contributed value of \$5,140.00 hereby ACCEPTED and acknowledged as an addition to Lee County Utilities.

THE FOREGOING RESOLUTION was offered by Commissioner \_\_\_\_\_ who moved for its adoption. The motion was seconded by Commissioner \_\_\_\_\_ and, upon being put to a vote, the vote was as follows:

- Commissioner Bob Janes: \_\_\_\_\_ (1)
- Commissioner Brian Bigelow: \_\_\_\_\_ (2)
- Commissioner Ray Judah: \_\_\_\_\_ (3)
- Commissioner Tammara Hall: \_\_\_\_\_ (4)
- Commissioner Frank Mann: \_\_\_\_\_ (5)

DULY PASSED AND ADOPTED this \_\_\_\_\_ day of \_\_\_\_\_, 2007.

ATTEST:  
CHARLIE GREEN, CLERK

BOARD OF COUNTY COMMISSIONERS  
OF LEE COUNTY, FLORIDA

By: \_\_\_\_\_  
DEPUTY CLERK

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

APPROVED AS TO FORM

\_\_\_\_\_  
OFFICE OF COUNTY ATTORNEY

**BS 20070619 - UTL**

COPY

LETTER OF COMPLETION

DATE: March 27, 2007

Department of Lee County Utilities  
Division of Engineering  
Post Office Box 398  
Fort Myers, FL 33902

Gentlemen:

This is to certify that the **water service(s) and water main extension** located at **HealthPark Florida - OB/GYN Medical Center** (Name of Development/Project) were designed by me and have been constructed in conformance with:  
**the revised plans, attached and the approved specifications**

Upon completion of the work, we observed the following successful tests of the facilities:

**Bacteriological Test and Pressure Test(s) - Water Main**

Very truly yours,

Johnson Engineering, Inc.

(Owner or Name of Corporation/Firm)

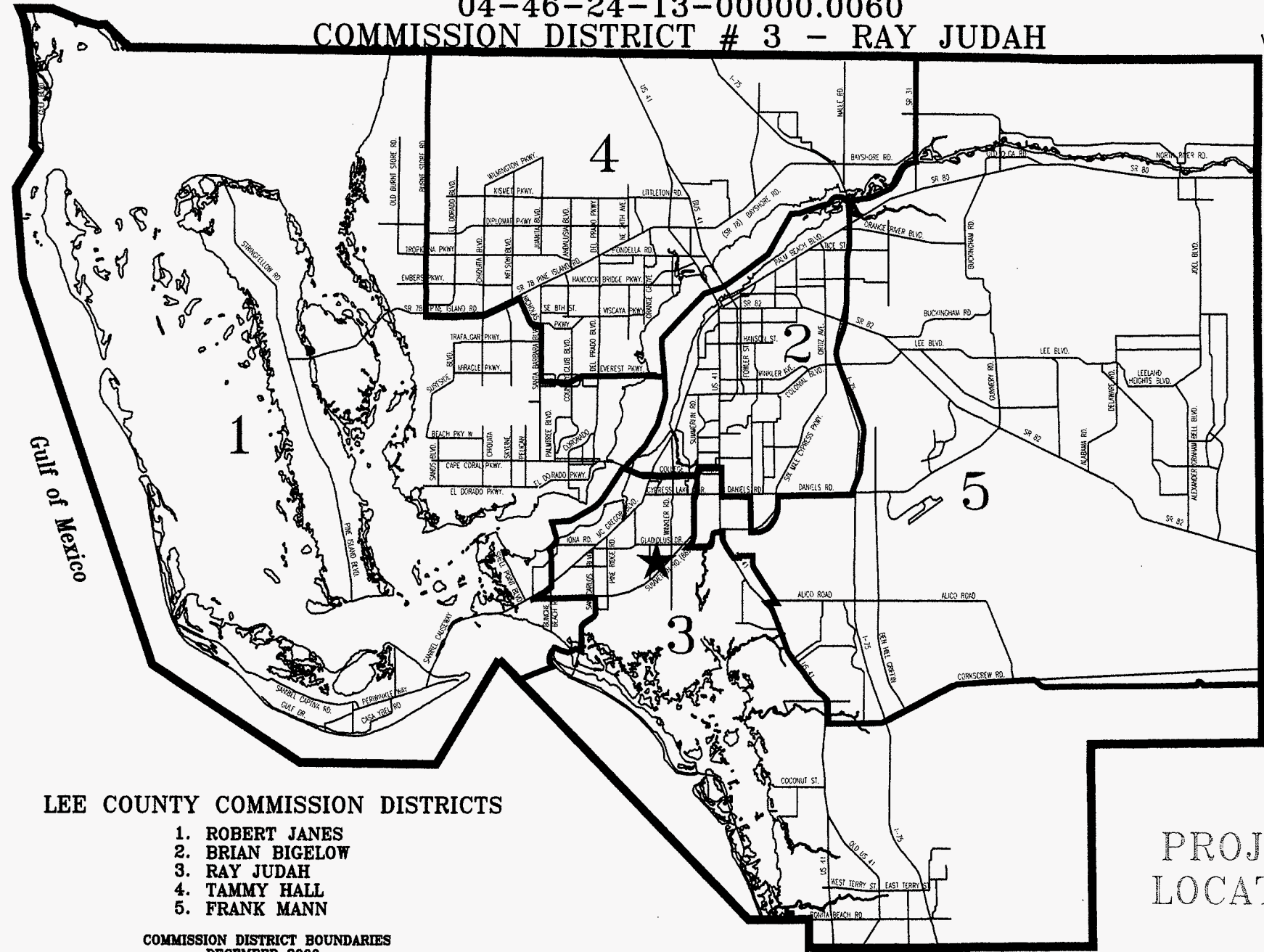
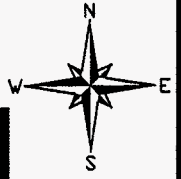


(Signature)

Kevin M. Winter, P.E., Project Engineer (41267)  
(Name and Title)

(Seal of Engineering Firm)

**HEALTHPARK FLORIDA - OB/GYN OFFICE**  
**04-46-24-13-0000.0060**  
**COMMISSION DISTRICT # 3 - RAY JUDAH**



Gulf of Mexico

COPY

**LEE COUNTY COMMISSION DISTRICTS**

- 1. ROBERT JANES
- 2. BRIAN BIGELOW
- 3. RAY JUDAH
- 4. TAMMY HALL
- 5. FRANK MANN

COMMISSION DISTRICT BOUNDARIES  
 DECEMBER 2000

PROJECT  
 LOCATION

COPY

WARRANTY

THE UNDERSIGNED parties do hereby warrant and/or guaranty all work executed by the contractor on the water and sewer systems of HealthPark Florida-OB/GYN Office to be free from defects in material and workmanship for a period of one (1) year from the date of acceptance by the Lee County Board of County Commissioners. The undersigned parties further agree that they will, at their own expense, repair and replace all such defective work and all other work damaged by said defective work under this Warranty-Guaranty


It is furthermore understood that the consideration for the giving of this warranty and/or guaranty is the requirement by the General Conditions and Specifications under which the contract was let that such warranty and/or guaranty would be given.

Florida West Underground, Inc.

(Contractor/Company Name)

Timothy D Tillman, Secretary Treasurer

(Authorized Representative, Title)

BY: 

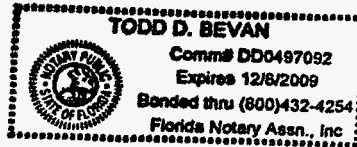
(Signature)

STATE OF FL )  
 ) SS:  
COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this 29<sup>th</sup> day of March, 2007 by Timothy D Tillman who is personally known to me - , and who did not take an oath.

  
Notary Public Signature

Printed Name of Notary Public



(Notary Seal & Commission Number)

COPY

WAIVER AND RELEASE OF LIEN  
UPON FINAL PAYMENT

The undersigned lienor, in consideration of the final payment in the amount of Five Thousand One Hundred Forty and No/100 Dollars(\$5,140.00 ) hereby waives and releases its lien and right to claim a lien for labor, services, or materials furnished to OB/GYN Realty Group LLP on the job of HealthPark Florida-OB/GYN Office to the following described property:

Healthpark Florida East  
(Name of Development/Project)

9021 Park Royal Dr; Ft Myers, Fl 33908  
(Location)

Fire Hydrant,  
Fire Line up to and including 1st OS and Y valve and  
Water /or Sewer Service(s)  
(Facilities Constructed)

04-46-24-13-00000.0060  
(Strap # or Section, Township & Range)

Dated on: December , 2006

By: [Signature]  
(Signature of Authorized Representative)

By: Timothy D Tillman  
(Print Name of Authorized Representative)

Title: Secretary Treasurer

Phone #: (239)936-8945 Ext.

Florida West Underground, Inc  
(Name of Firm or Corporation)

10880 Metro Pkwy STE J  
(Address of Firm or Corporation)

Fort Myers, FL 33966-1153  
(City, State & Zip Of Firm Or Corporation)

Fax#: (239)936-8956

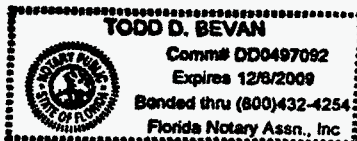
STATE OF FL )  
 ) SS:  
COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this 29th day of March, 2007 by Timothy D Tillman (who is personally known to me) , and who did not take an oath.

[Signature]  
(Notary Public Signature)

(Notary Seal & Commission Number)

(Printed Name of Notary Public)



## CERTIFICATION OF CONTRIBUTORY ASSETS

**PROJECT NAME:** Healthpark Florida - OB/GYN Office

---

**STRAP NUMBER:** 04-46-24-13-00000.0060

---

**LOCATION:** 9021 Park Royal Drive, Fort Myers, FL 33908

---

**OWNER'S NAME:** (as shown on Deed) OB/GYN Realty Group LLP

---

**OWNER'S ADDRESS:** 12995 S. Cleveland Ave Ste 206

---

**OWNER'S ADDRESS:** Fort Myers, FL 33907-3870

---

**OWNER'S TELEPHONE #:** (239) 275-5522

---

**TYPE UTILITY SYSTEM:** Potable Water  
 (Please provide separate 'Certifications' for potable water, sanitary sewer and effluent reuse facilities.)

**DESCRIPTION AND COST OF MATERIAL, LABOR, AND SERVICES**  
 Please list each element of the system from the drop-down list provided.

ITEM	SIZE	QUANTITY	UNIT	UNIT COST	TOTAL
FIRE LINE UP TO AND INCL 1ST OS + Y VALVE	6"	1.0	EA	\$3,500.00	\$3,500.00
FIRE HYDRANT ASSEMBLY		1.0	EA	\$750.00	\$750.00
SINGLE WATER SERVICE/COMPLETE	2"	1.0	EA	\$750.00	\$750.00
<b>TOTAL</b>					<b>\$5,000.00</b>

(If more space is required, use additional forms(s).)

I do hereby certify that the quantities of material and services described above are a true and accurate representation of the as-installed cost of the system being contributed to Lee County and corresponds with the record drawings.

CERTIFYING:

X 

\_\_\_\_\_  
(Signature of Certifying Agent)

Timothy D Tillman, Secretary Treasurer  
(Name & Title of Certifying Agent)

Florida West Underground, Inc.  
(Name of Firm or Corporation)

10880 Metro Pkwy Suite J  
(Address of Firm or Corporation)

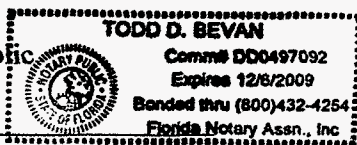
Fort Myers, FL 33966 - 1153

STATE OF FL )  
                  ) SS:  
COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this 29th day of March, 2007 by Timothy D Tillman who is personally known to me, and who did not take an oath.

  
\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Printed Name of Notary Public



\_\_\_\_\_  
Notary Commission Number

(NOTARY SEAL)



## CERTIFICATION OF CONTRIBUTORY ASSETS

PROJECT NAME: HealthPark Florida-OB/GYN Office

STRAP NUMBER: 04-46-24-13-00000.0060

LOCATION: 9021 Park Royal Dr; Ft Myers FL 33908

OWNER'S NAME: (as shown on Deed) OB/GYN Realty Group LLP

OWNER'S ADDRESS: 12995 S Cleveland Ave Ste 206

OWNER'S ADDRESS: Fort Myers, FL 33907-3870

OWNER'S TELEPHONE #: (239) 275-5522

TYPE UTILITY SYSTEM: Sanitary Sewer

(Please provide separate 'Certifications' for potable water, sanitary sewer and effluent reuse facilities.)

### DESCRIPTION AND COST OF MATERIAL, LABOR, AND SERVICES

Please list each element of the system from the drop-down list provided.

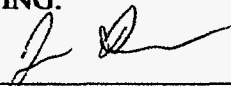
ITEM	SIZE	QUANTITY	UNIT	UNIT COST	TOTAL
PVC SDR-26	8"	13.0	LF	\$10.00	\$130.00
SINGLE SEWER SERVICE W/CLEANOUT	8" x 6"	1.0	EA	\$10.00	\$10.00
<b>TOTAL</b>					<b>\$140.00</b>

(If more space is required, use additional forms(s).)



I do hereby certify that the quantities of material and services described above are a true and accurate representation of the as-installed cost of the system being contributed to Lee County and corresponds with the record drawings.

CERTIFYING:

X 

(Signature of Certifying Agent)

Timothy D Tillman, Secretary Treasurer

(Name & Title of Certifying Agent)

Florida West Underground, Inc.

(Name of Firm or Corporation)

10880 Metro Pkwy Suite J

(Address of Firm or Corporation)

Fort Myers, FL 33966 - 1153

STATE OF FL )

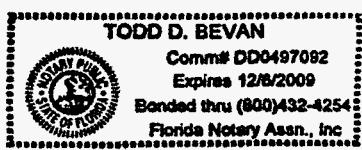
) SS:

COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this 25th day of March, 2007 by Timothy D Tillman who is personally known to me - , and who did not take an oath.

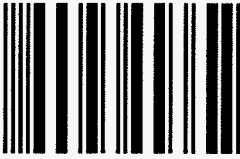
  
Notary Public Signature

Printed Name of Notary Public



Notary Commission Number

(NOTARY SEAL)



**FLORIDA DEPARTMENT OF REVENUE**  
**RETURN FOR TRANSFERS OF INTEREST IN REAL PROPERTY**  
 (PLEASE READ INSTRUCTIONS BEFORE COMPLETING)



FDOR10240300  
 DR-219  
 R. 07/98

Enter numbers as shown below.

If typing, enter numbers as shown below.

1. Parcel Identification Number  
 (If Parcel ID not available  
 please call County Property  
 Appraiser's Office) →

0 1 2 3 4 5 6 7 8 9

0123456789

04462413000000060

2. Mark (x) all  
 that apply

Multi-parcel  
 transaction? →

Transaction is a split  
 or cutout from  
 another parcel? →

Property was improved  
 with building(s) at time  
 of sale/transfer? →

3. Grantor (Seller):

**EASEMENT:**

**BS 20070619**

**OB/GYN REALTY GROUP LLP**

Last First MI Corporate Name (if applicable)  
**12995 S CLEVELAND AVE-#206 FT MYERS FL 33907**

Mailing Address City State Zip Code Phone No.  
**THOM OSTERHOUT AS AGENT: FOR LEE CO. BD. OF CO. COMMISSIONERS**

4. Grantee (Buyer):

Last First MI Corporate Name (if applicable)  
**P. O. BOX 398 FT. MYERS FL 33902 2394798181**

Mailing Address City State Zip Code Phone No.

5. Date of Sale/Transfer

05 01  
 Month Day

2007 \$  
 Year

Sale/Transfer Price

\$10

. 00

Property Located In 46 County Code

(Round to the nearest dollar.)

6. Type of Document

Warranty  
 Deed

Contract/Agreement for Deed  Other  
 Quit Claim Deed

7. Are any mortgages on the property? If "Yes",  
 outstanding mortgage balance:

(Round to the nearest dollar.) \$

YES  NO

. 00

8. To the best of your knowledge, were there unusual circumstances or conditions to the sale/transfer  
 such as: Forced sale by court order? Foreclosure pending? Distress Sale? Title defects? Corrective Deed? Mineral rights?  
 Sale of a partial or undivided interest? Related to seller by blood or marriage.

YES  NO

9. Was the sale/transfer financed? YES  NO

If "Yes", please indicate type or types of financing:

Conventional

Seller Provided

Agreement or  
 Contract for Deed

Other

10. Property Type:

Residential Commercial Industrial Agricultural Institutional/  
 Miscellaneous Government Vacant Acreage Timeshare

Mark (x) all  
 that apply

11. To the best of your knowledge, was personal property  
 included in the sale/transfer? If "Yes", please state the  
 amount attributable to the personal property. (Round to the nearest dollar.)

YES  NO \$

Cents

. 00

12. Amount of Documentary Stamp Tax →

\$ 0.70

13. If no tax is due in number 12, is deed exempt from Documentary Stamp Tax under s. 201.02(6), Florida Statutes?

YES NO

Under penalties of perjury, I declare that I have read the foregoing return and that the facts stated in it are true. If prepared by someone other  
 than the taxpayer, his/her declaration is based on all information of which he/her has any knowledge.

Signature of Grantor or Grantee or Agent

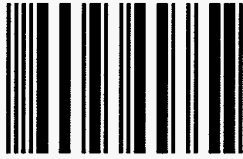
*Thom Osterhout*

Date 4/12/07

WARNING: FAILURE TO FILE THIS RETURN OR ALTERNATIVE FORM APPROVED BY THE DEPARTMENT OF REVENUE SHALL RESULT IN A PENALTY OF \$25.00 IN ADDITION TO ANY  
 OTHER PENALTY IMPOSED BY THE REVENUE LAW OF FLORIDA.

To be completed by the Clerk of the Circuit Court's Office	Clerks Date Stamp
<b>This copy to Department of Revenue</b>	
O. R. Book and Page Number and File Number	
Date Recorded	
Month Day Year	

**This copy to Department of Revenue**



**FLORIDA DEPARTMENT OF REVENUE**  
**RETURN FOR TRANSFERS OF INTEREST IN REAL PROPERTY**  
 (PLEASE READ INSTRUCTIONS BEFORE COMPLETING)



FDR10240300  
 DR-219  
 R. 07/98

Use black ink. Enter numbers as shown below. If typing, enter numbers as shown below.

0	1	2	3	4	5	6	7	8	9			0	1	2	3	4	5	6	7	8	9
---	---	---	---	---	---	---	---	---	---	--	--	---	---	---	---	---	---	---	---	---	---

1. Parcel Identification Number (If Parcel ID not available please call County Property Appraiser's Office) → [0][4][6][2][4][1][3][0][0][0][0][0][6][0]
2. Mark (x) all that apply: Multi-parcel transaction?  Transaction is a split or cutout from another parcel?  Property was improved with building(s) at time of sale/transfer?

3. Grantor (Seller): **EASEMENT: BS 20070619 OB/GYN REALTY GROUP LLP**  
 Last First MI Corporate Name (if applicable)  
**12995 S CLEVELAND AVE-#206 FT MYERS FL 33907**

Mailing Address City State Zip Code Phone No.  
 4. Grantee (Buyer): **THOM OSTERHOUT AS AGENT: FOR LEE CO. BD. OF CO. COMMISSIONERS**  
 Last First MI Corporate Name (if applicable)  
**P. O. BOX 398 FT. MYERS FL 33902 (239) 4798181**

5. Date of Sale/Transfer: **05/07/2007** Sale/Transfer Price: **\$10,000.00**  
 Month Day Year (Round to the nearest dollar.) Property Located In: **Lee**

6. Type of Document:  Contract/Agreement for Deed  Other  Warranty Deed  Quit Claim Deed  
 7. Are any mortgages on the property? If "Yes", outstanding mortgage balance: **\$0.00**  
 (Round to the nearest dollar.)

8. To the best of your knowledge, were there unusual circumstances or conditions to the sale/transfer such as: Forced sale by court order? Foreclosure pending? Distress Sale? Title defects? Corrective Deed? Mineral rights? Sale of a partial or undivided interest? Related to seller by blood or marriage. YES  /  NO

9. Was the sale/transfer financed? YES  /  NO If "Yes", please indicate type or types of financing:  
 Conventional  Seller Provided  Agreement or Contract for Deed  Other

10. Property Type: Residential  Commercial  Industrial  Agricultural  Institutional/Miscellaneous  Government  Vacant  Acreage  Timeshare

11. To the best of your knowledge, was personal property included in the sale/transfer? If "Yes", please state the amount attributable to the personal property. (Round to the nearest dollar.) YES  /  NO \$ **0.00**

12. Amount of Documentary Stamp Tax → \$ **70**

13. If no tax is due in number 12, is deed exempt from Documentary Stamp Tax under s. 201.02(6), Florida Statutes? YES  /  NO

Under penalties of perjury, I declare that I have read the foregoing return and that the facts stated in it are true. If prepared by someone other than the taxpayer, his/her declaration is based on all information of which he/her has any knowledge.

Signature of Grantor or Grantee or Agent: [Signature] Date: 4/12/07

WARNING: FAILURE TO FILE THIS RETURN OR ALTERNATIVE FORM APPROVED BY THE DEPARTMENT OF REVENUE SHALL RESULT IN A PENALTY OF \$25.00 IN ADDITION TO ANY OTHER PENALTY IMPOSED BY THE REVENUE LAW OF FLORIDA.

To be completed by the Clerk of the Circuit Court's Office	Clerks Date Stamp
<p><b>This copy to Property Appraiser</b></p> <p>O. R. Book <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>          and          Page Number <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>          and          File Number <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>          Date Recorded <input type="checkbox"/><input type="checkbox"/> / <input type="checkbox"/><input type="checkbox"/> / <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/>  <small>Month Day Year</small></p>	

**This copy to Property Appraiser**

**TO: RECORDERS OFFICE**

**PLEASE PUT MY NAME ON THE ATTENTION LINE:**

***Sue Gulledge***

**CHARGE TO: LEE COUNTY UTILITIES -  
LCU 500283**

**ACCOUNT NO. OD5360748700.504930**

**THANK YOU.**

**FOR UTILITIES USE ONLY:**

**BLUE SHEET NO. 20070619 - UTL**

**PROJECT NAME: HEALTHPARK FLORIDA -  
OB/GYN OFFICE**

**EASEMENT NAME: OB/GYN REALTY GROUP, LLP**

**TYPING BY: *Sue Gulledge***

This Instrument Prepared By:  
Lee County Utilities  
1500 Monroe Street - 3<sup>rd</sup> Floor  
Fort Myers, Florida 33901

Strap Number(s):

**04-46-24-13-00000.0060**

**LCU 500283**

(THIS SPACE RESERVED FOR RECORDING)

**GRANT OF PERPETUAL PUBLIC UTILITY EASEMENT**

THIS INDENTURE is made and entered into this \_\_\_\_ day of \_\_\_\_\_ 2007, by and between "OB/GYN REALTY GROUP, LLP." Owner, hereinafter referred to as GRANTOR(S), and "LEE COUNTY", a political subdivision of the State of Florida, hereinafter referred to as GRANTEE.

**WITNESSETH:**

1. For and in consideration of the sum of TEN DOLLARS (\$10.00) and other good and valuable consideration, the receipt of which is hereby acknowledged and accepted, GRANTOR hereby grants, bargains, sells and transfers to the GRANTEE, its successors and assigns, a perpetual public utility easement situated in Lee County, Florida, located and described as set forth in Exhibit "A", attached hereto and made a part hereof.

2. GRANTEE, its successors, appointees and assigns, are granted the right, privilege, and authority to construct, replace, renew, extend and maintain a wastewater collection and/or water distribution system, together with, but not limited to, all necessary service connections, manholes, valves, fire hydrants, lift stations and appurtenances, to be located on, under, across and through the easement which is located on the property described (Exhibit "A"), with the additional right, privilege and authority to remove, replace, repair and enlarge said system, and to trim and remove roots, trees, shrubs, bushes and plants, and remove fences or other improvements which may affect the operation of lines, mains and/or utility facilities.

**BS 20070619 - UTL**



3. The public utility easement will not be limited to any particular diameter size or type and/or number of connections to other water/sewer mains for providing water/sewer service to this and any adjacent properties. The total area of this public utility easement is reserved for utility lines, mains, or appurtenant facilities and for any landscaping (excluding trees), walkways, roadways, drainage ways, or similar uses. Houses, fences, buildings, carports, garages, storage sheds, overhangs, or any other structures or portions of structures may not be constructed on or placed within this easement at anytime, present or future, by GRANTOR, or its heirs, successors or assigns.

4. Title to all utilities constructed and/or placed hereunder by GRANTEE or its agents will remain in the GRANTEE, GRANTEE's successors, appointees, and/or assigns.

5. Subject to any pre-existing easements for public highways or roads, railroads, laterals, ditches, pipelines and electrical transmission or distribution lines and telephone and cable television lines covering the land herein described, GRANTOR(S) covenant that they are lawfully seized and possessed of the described real property (Exhibit "A"), have good and lawful right and power to sell and convey it, and that the said property is free from any and all liens and encumbrances, except as herein stated, and accordingly, GRANTOR(S) will forever defend the right, title and terms of this said easement and the quiet possession thereof by GRANTEE against all claims and demands of all other entities.

6. GRANTOR(S), its heirs, successors or assigns, agrees to assume all liability for any consequential damages to any houses, fences, buildings, carports, garages, storage sheds, overhangs, or any other structures or portions of structures subsequently constructed by GRANTOR(S) in violation of paragraph 3. within the above easement, which result from the required activities of the GRANTEE for any construction, maintenance or repairs to the utilities located within the above-described easement.

7. GRANTEE will be liable for money damages in tort for any injury to or loss of property, personal injury, or death caused by the negligent or wrongful act(s) or omission(s) of any official or employee of the GRANTEE while acting within the scope of the official's or employee's office or employment under circumstances in which a private person would be found to be liable in accordance with the general laws of the State of Florida, and subject to the limitations as set out in Section 768.28, Florida Statutes, as it may be revised, amended or renumbered from time to time.

8. GRANTEE will have reasonable right of access across GRANTOR's property for the purposes of reaching the described easement (Exhibit "A") on either paved or unpaved surfaces. Any damage to GRANTOR's property or permitted improvements thereon as the result of such access to the described easement or the construction, maintenance, or repairs located within the described easement shall be restored by GRANTEE, to the condition in which it existed prior to the damage, as is reasonably practicable.

9. By acceptance of this easement, the GRANTEE assumes no responsibility for ownership or maintenance of any associated roads. The easement is strictly for utility purposes.

10. This easement will be binding upon the parties hereto, their successors in interest and any assigns.

(Balance of Page Left Intentionally Blank)

---





IN WITNESS WHEREOF, the GRANTOR has caused this document to be signed on the date and year first above written.

Elizabeth Grogg  
[1<sup>st</sup> Witness' Signature]

BY: Dr. Rex E. Stubbs, M.D.  
[Signature Grantor's/Owner's]

Elizabeth Grogg  
[Type or Print Name]

Dr. Rex E. Stubbs  
[Type or Print Name]

Latisha Gwathney  
[2<sup>nd</sup> Witness' Signature]

Administrative Partner  
[Title]

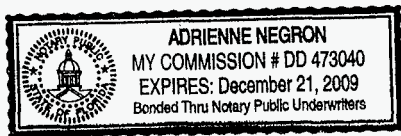
Latisha Gwathney  
[Type or Print Name]

STATE OF FLORIDA

COUNTY OF Lee

The foregoing instrument was signed and acknowledged before me this 22<sup>nd</sup> day of February, 2007, by Dr. Rex E. Stubbs, who produced the following ~~as identification~~ or is personally know to me, and who did/did not take an oath.

[stamp or seal]



Adrienne Negron  
[Signature of Notary]

Adrienne Negron  
[Typed or Printed Name]

Approved and accepted for and on behalf of Lee County, Florida, this \_\_\_\_\_ day of \_\_\_\_\_, 2007.

ATTEST:  
CHARLIE GREEN, CLERK

BOARD OF COUNTY COMMISSIONERS  
OF LEE COUNTY, FLORIDA

BY: \_\_\_\_\_  
Deputy Clerk

BY: \_\_\_\_\_  
Chair

APPROVED AS TO FORM

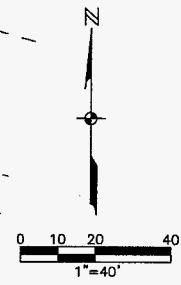
BY: \_\_\_\_\_  
Office of the County Attorney  
Scott S. Covert, Esquire

S:\055101\20055101 - LCU Easement - Sketch.dwg (layout1) \$d Feb 19, 2007 - 10:33am

CURVE TABLE					
CURVE	RADIUS	DELTA	CHORD BEARING	CHORD	LENGTH
C1	629.00	1°33'17"	N79°47'34"W	17.07	17.07
C2	609.00	0°41'08"	N80°52'23"W	7.29	7.29
C3	609.00	0°18'15"	N83°14'59"W	3.23	3.23
C4	629.00	2°49'54"	S81°59'09"E	31.08	31.09
C5	721.00	0°17'21"	S83°12'35"E	3.64	3.64
C6	736.00	1°35'34"	N82°16'59"W	20.46	20.46
C7	721.00	1°20'18"	S82°23'45"E	16.84	16.84

**NOTES:**

- BEARINGS SHOWN HEREON ARE BASED ON THE WEST LINE OF LOT 6, HEALTHPARK FLORIDA EAST, AS RECORDED IN PLAT BOOK 68, PAGE 17 OF THE PUBLIC RECORDS, LEE COUNTY, FLORIDA, WHICH BEARS SOUTH 21° 06' 25" WEST.
- THIS SKETCH DOES NOT MAKE ANY REPRESENTATION AS TO ZONING OR DEVELOPMENT RESTRICTIONS ON THE SUBJECT PARCEL.
- POC = POINT OF COMMENCEMENT.
- POB = POINT OF BEGINNING.
- DESC. = DESCRIPTION
- PB = PLAT BOOK
- PG = PAGE
- PARCEL A CONTAINS 2,603 SQUARE FEET (0.06 ACRES) MORE OR LESS.
- PARCEL B CONTAINS 307 SQUARE FEET (0.01 ACRES) MORE OR LESS.
- DESCRIPTION ATTACHED.



LINE TABLE		
LINE	BEARING	DISTANCE
L1	S19°36'01"W	10.11
L2	S08°13'09"W	20.00
L3	S08°13'09"W	56.81
L4	N81°46'51"W	59.63
L5	N08°13'09"E	20.00
L6	S81°46'51"E	39.63
L7	N08°13'09"E	36.67
L8	N83°24'06"W	3.22
L9	N08°13'09"E	20.01
L10	S83°24'06"E	2.66
L11	S21°06'25"W	10.32
L12	S19°53'45"W	15.40
L13	N19°53'45"E	15.31

THIS IS NOT A SURVEY

*Michael W. Norman*  
 MICHAEL W. NORMAN (FOR THE FIRM LB-642)  
 PROFESSIONAL SURVEYOR AND MAPPER  
 FLORIDA CERTIFICATE NO. 4500  
**FEB 21 2007**  
 DATE SIGNED:  
 NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.

NOT VALID WITHOUT SHEET 2 OF 2

LEE COUNTY UTILITY EASEMENT  
 LYING IN LOTS 6 & 7  
 HEALTHPARK FLORIDA EAST  
 PLAT BOOK 68, PAGE 17-22, LEE COUNTY PUBLIC RECORDS  
 SECTION 4, TOWNSHIP 46 SOUTH, RANGE 24 EAST AND  
 SECTION 33, TOWNSHIP 45 SOUTH, RANGE 24 EAST  
 LEE COUNTY, FLORIDA



2158 JOHNSON STREET  
 P.O. BOX 1550  
 FORT MYERS, FLORIDA 33902-1550  
 PHONE (239) 334-0046  
 FAX (239) 334-3661  
 E.B. #642 & L.B. #642

SKETCH TO ACCOMPANY  
 DESCRIPTION

DATE	PROJECT NO.	FILE NO.	SCALE	SHEET
02/19/07	20055101	33-45-24	1"=40'	1 OF 2

COPY

COPY

February 19, 2007

**DESCRIPTION**

**LEE COUNTY UTILITY EASEMENT  
LYING IN  
LOTS 6 & 7 HEALTHPARK FLORIDA EAST  
PLAT BOOK 68, PAGE 17, PUBLIC RECORDS OF LEE COUNTY, FLORIDA  
SECTION 33, TOWNSHIP 45 SOUTH, RANGE 24 EAST  
LEE COUNTY, FLORIDA**

A tract or parcel of land lying in Section 33, Township 45 South, Range 24 East Lee County, Florida, being part of Lots 6 and 7, HealthPark Florida East, as recorded in Plat Book 68 at Page 17, Public Records of Lee County, Florida which tract or parcel is more particularly described as follows:

**PARCEL A**

Commencing at the northeast corner of said Lot 6 run South 19° 36' 01" West along the east line of said Lot 6 for 10.11 feet to an intersection with the southerly curved line of a 10 foot utility easement as shown on said plat; thence run northwesterly along said curved easement line to the left of radius 629.00 feet (delta 01° 33' 17") (chord bearing North 79° 47' 34" West) (chord 17.07 feet) for 17.07 feet to the Point of Beginning.

From said Point of Beginning run South 08° 13' 09" West departing said easement for 20.00 feet to the beginning of a non-tangent curve; thence run northwesterly along said non-tangent curve to the left of radius 609.00 feet (delta 00° 41' 08") (chord bearing North 80° 52' 23" West) (chord 7.29 feet) for 7.29 feet; thence run South 08° 13' 09" West for 56.81 feet; thence run North 81° 46' 51" West for 59.63 feet; thence run North 08° 13' 09" East for 20.00 feet; thence run South 81° 46' 51" East for 39.63 feet; thence run North 08° 13' 09" East for 36.67 feet to the beginning of a non-tangent curve; thence run northwesterly along said non-tangent curve to the left of radius 609.00 feet (delta 00° 18' 15") (chord bearing North 83° 14' 59" West) (chord 3.23 feet) for 3.23 feet; thence run North 83° 24' 06" West for 3.22 feet; thence run North 08° 13' 09" East for 20.01 feet to an intersection with said southerly curved easement line; thence run South 83° 24' 06" East along said easement line for 2.66 feet to a point of curvature; thence run southeasterly along said curve to the right of radius 629.00 feet (delta 02° 49' 54") (chord bearing South 81° 59' 09" East) (chord 31.08 feet) for 31.09 feet to the Point of Beginning.

Parcel contains 2,603 square feet (0.06 acres), more or less.

**PARCEL B**

Commencing at the northwest corner of said Lot 6 run South 21° 06' 25" West along the west line of said Lot 6 for 10.32 feet to an intersection with the southerly curved line of a 10 foot utility easement as shown on said plat and the Point of Beginning.

From said Point of Beginning run southeasterly along said curved easement line to the left of radius 721.00 feet (delta 00° 17' 21") (chord bearing South 83° 12' 35" East) (chord 3.64 feet) for 3.64 feet; thence run South 19° 53' 45" West departing said easement for 15.40 feet to the beginning of a non-tangent curve; thence run northwesterly along said non-tangent curve to the right of radius 736.00 feet (delta 01° 35' 34") (chord bearing North 82° 16' 59" West) (chord 20.46 feet) for 20.46 feet; thence run North 19° 53' 45" East for 15.31 feet to an intersection with said southerly curved easement line; thence run southeasterly along said curved easement to the left of radius 721.00 feet (delta 01° 20' 18") (chord bearing South 82° 23' 45" East) (chord 16.84 feet) for 16.84 feet to the Point of Beginning.

Parcel contains 307 square feet (0.01 acres), more or less.

Bearings hereinabove mentioned are based on the west line of Lot 6, HealthPark Florida East, as recorded in Plat Book 68, Page 17 of the Public Records, Lee County, Florida, which bears South 21° 06' 25" West.

02-19-07 - 20055101 - Lots 6 & 7 - HealthPark Florida East