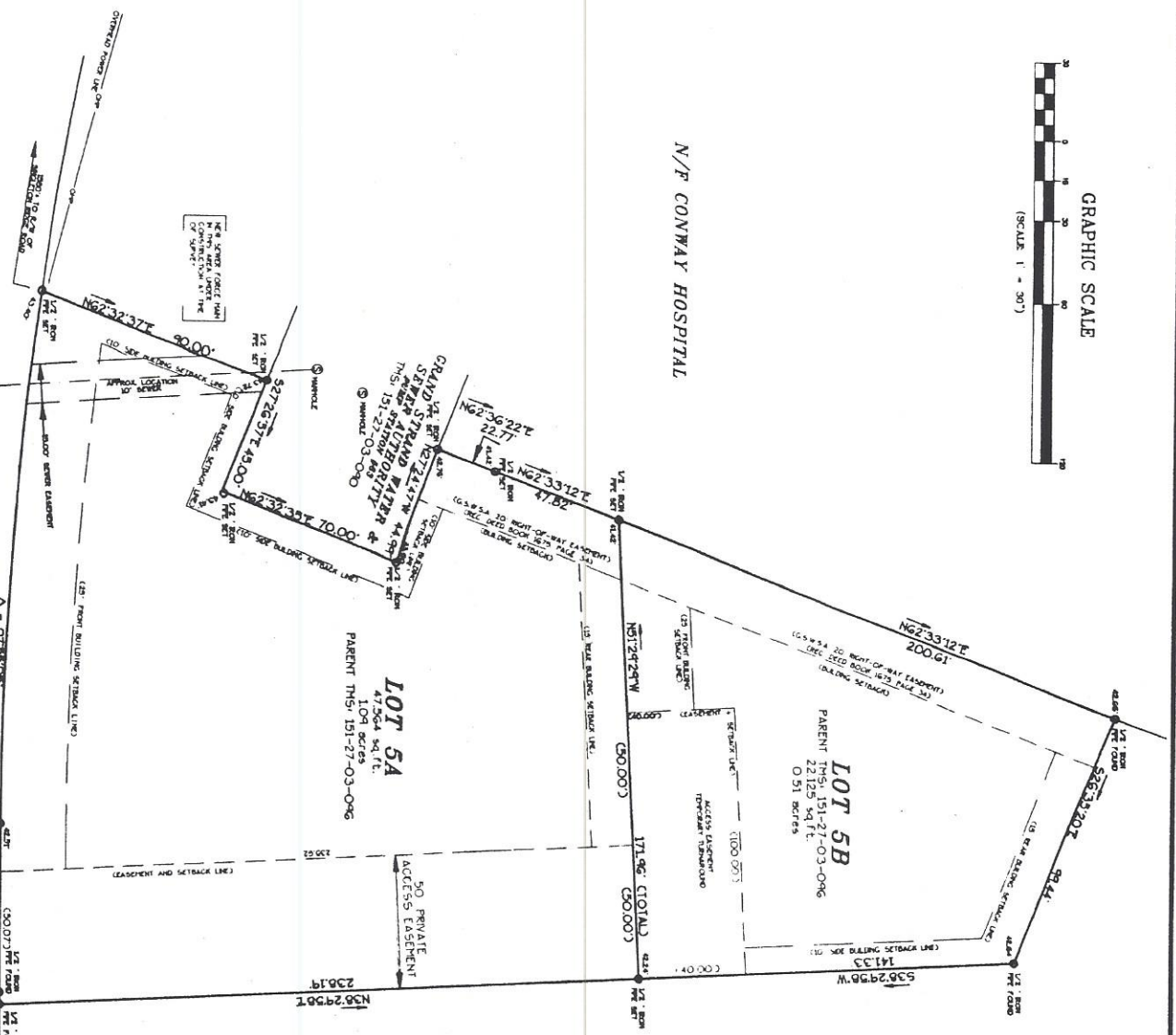


N/P CONWAY HOSPITAL

N/P MYRTLE TRACE
PHASE VIII-A
TMS: 151-27-03-089



MYRTLE TRACE DRIVE EXTENSION
(66' R/W)

Δ = 07°59'05"
R = 1447'00"
CH = 141'93" W
151°51'35" W

Δ = 00°30'02"
R = 5414.4'
L = 473'
CH = N46°46'33" W
473'



CERTIFICATE OF EASEMENT DEDICATION
I, the undersigned, do hereby certify that I am (s) the owner(s) of the property shown hereon and that I have the authority to execute this instrument. I do hereby certify that the easement shown hereon is as agreed upon and I/we hereby dedicate this easement for the use stated for perpetuity.

GRANTOR _____ DATE _____

GRANTEE _____ DATE _____

CERTIFICATE OF APPROVAL FOR RECORDING
I hereby certify that the subdivision shown hereon has been found to conform with the subdivision regulations of the City of Conway, South Carolina, and that the same have been approved for recording in the office of the Clerk of Court.

DATE _____
OWNER _____
OWNER _____

PLAT OF
NEW LOTS 5A AND 5B
SUBDIVIDED FROM LOT 5
BURNING RIDGE MEDICAL CENTER
PARENT TMS: 151-27-03-086
CONWAY TOWNSHIP
HOBBS COUNTY, SOUTH CAROLINA
FOR
F.B.P., LLC

Associated
Land
Surveyors, Inc.



DATE: SEPTEMBER 10, 1989 F.B. #22 Pg. 97 SCALE: 1" = 30'

I hereby certify that to the best of my knowledge, information, and belief, the information furnished hereon is true and correct and that the same conform with the requirements of the subdivision regulations of the City of Conway, South Carolina, and that the same have been approved for recording in the office of the Clerk of Court.

BY: *Michael D. Ode*
Michael D. Ode
Surveyor