



LIBER 16149 PC 013

Royal Oak, Mich
355079180

OVERHEAD EASEMENT (RIGHT OF WAY) NO. 3612

On 11-29, 1995, for the consideration of system betterment, Grantor grants to Grantee a permanent overhead easement ("Right of Way") in, on and across a part of Grantor's Land called the "Right of Way Area".

"Grantor" is:

Ronald G. Phinney, *A SINGLE MAN, SURVIVOR OF HIMSELF AND HIS DECEASED WIFE, BARBARA M. PHINNEY, WHOSE DEATH CERTIFICATE IS ATTACHED*
1125 E. Second, Royal Oak, Michigan 48067

"Grantee" is:

The Detroit Edison Company, a Michigan corporation, 2000 Second Avenue, Detroit, Michigan 48226

"Grantor's Land" is in the City of Royal Oak, Oakland County, described as:

Part of the Northeast one-quarter (1/4) of Section 22, Town 1 North, Range 11 East, Ganger's Sub, Lot 6, as recorded in Liber 34, Page 3 of Plats, Oakland County Records. Sidwell No. 25-22-202-015.

The "Right of Way Area" is a part of Grantor's Land and is described as:

The North Five (5) feet of Grantor's land.

- Purpose:** The purpose of this Right of Way is to construct, reconstruct, modify, add to, operate and maintain overhead utility line facilities consisting of poles, guys, anchors, wires, cables, transformers and accessories.
- Access:** Grantee has the right of access to and from the Right of Way Area.
- Building or other Permanent Structures:** No buildings or other permanent structures shall be placed in the Right of Way Area without Grantee's prior written consent.
- Trees, Bushes, Branches or Roots:** Grantee may trim, cut down, remove or otherwise control any trees, bushes, branches or roots in the Right of Way Area (or that could grow into the Right of Way Area) that Grantee believes could interfere with the safe and reliable construction, operation and maintenance of Grantee's facilities.
- Restoration:** If Grantee's employees, contractors, vehicles or equipment damage Grantor's Land while entering Grantor's Land for the purposes stated in this Right of Way, then Grantee shall restore Grantor's Land as nearly as can be to its original condition.
- Successors:** This Right of Way runs with the land and binds and benefits Grantor's and Grantee's successors, lessees, licensees and assigns.

RECORDED RIGHT OF WAY NO. 3400349386

Witnesses:(type or print name below signature)

Grantor:(type or print name below signature)

James D. McDonald
JAMES D. McDONALD
Kimberly A. Dinoto
KIMBERLY A. DINOTO

Ronald G. Phinney
Ronald G. Phinney

Acknowledged before me in OAKLAND County, Michigan, on 11-29, 1995 by Ronald G. Phinney, *A SINGLE MAN, SURVIVOR OF HIMSELF AND HIS DECEASED WIFE, BARBARA M. PHINNEY, WHOSE DEATH CERTIFICATE IS ATTACHED.*

Notary's Stamp JAMES D. McDONALD
Notary Public, Oakland County, Michigan
My Commission Expires May 30, 2000
(Notary's name, county and date commission expires)

Notary's Signature James D. McDonald

Prepared by and Return to: James D. McDonald, Royal Oak Service Center, 3425 Starr Road, Royal Oak, Michigan 48073/kad

\$ 9.00 MISCELLANEOUS RECORDING
\$ 2.00 REMONUMENTATION
3 APR 96 1:48 P.M. RECEIPT# 225A
PAID RECORDED OAKLAND COUNTY
LYNN D. ALLEN, CLERK/REGISTER OF DEEDS

OK - G.K.

LF 303955
CF



STATE OF MICHIGAN
DEPARTMENT OF PUBLIC HEALTH
CERTIFICATE OF DEATH

STATE FILE NUMBER
0843972

RECORDED RIGHT OF WAY NO. 44386

FOR USE BY PHYSICIAN OR INSTITUTION

DECEDENT

PARENTS

INFORMANT

BY

CAUSE OF DEATH

CERTIFIER

MEDICAL EXAMINER

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

1 DECEDENT'S NAME (First, Middle, Last) BARBARA MARIE PHINNEY					2 SEX Female	3 DATE OF DEATH (Month, Day, Year) March 29, 1995
4a AGE - Last Birthday (Years) 51	4b UNDER 1 YEAR MONTHS 51	4c UNDER 1 DAY HOURS 51	4d UNDER 1 DAY MINUTES 51	5 DATE OF BIRTH (Month, Day, Year) June 23, 1943	6 COUNTY OF DEATH Oakland	
7a LOCATION OF DEATH (Enter place officially pronounced dead in 7a, 7b, 7c.) HOSPITAL OR OTHER INSTITUTION - Name (If not in either, give street and number) 1125 E. Second				7b IF HOSP OR INST Inpatient. Op / Emer. Room. DOA (Specify)	7c CITY, VILLAGE, OR TOWNSHIP OF DEATH Royal Oak	
8 SOCIAL SECURITY NUMBER 365-44-5497		9a USUAL OCCUPATION (Give kind of work done during most of working life. Do not use retired) Secretary		9b KIND OF BUSINESS OR INDUSTRY Manufacturing		
10a CURRENT RESIDENCE - STATE Michigan	10b COUNTY Oakland	10c LOCALITY (Check one box and specify) <input checked="" type="checkbox"/> INSIDE CITY OR VILLAGE OF <input type="checkbox"/> TWP. OF Royal Oak		10d STREET AND NUMBER 1125 E. Second		
10e ZIP CODE 48067	11 BIRTHPLACE (City and State or Foreign Country) Pontiac Michigan	12 MARITAL STATUS - Married, Never Married, Widowed, Divorced (Specify) Married	13 SURVIVING SPOUSE (If wife, give name before first married) Ronald G. Phinney	14 WAS DECEDENT EVER IN U.S. ARMED FORCES? (Specify Yes or No) No		
15 ANCESTRY - Mexican, Puerto Rican, Cuban, Central or South American, Chicano, other Hispanic, Afro-American, Arab, English, French, Finnish, etc. (Specify below) Scottish, English, Irish		16 RACE - American Indian, Black, White, etc. If Asian, give nationality i.e., Chinese, Filipino, Asian Indian, etc. (Specify below) White		17 DECEDENT'S EDUCATION (Specify only highest grade completed) Elementary/Secondary (0-12) 12 College (1-4 or 5+) 12		
18 FATHER'S NAME (First, Middle, Last) Bill N. Allen			19 MOTHER'S NAME (First, Middle, Surname before first married) Thelma McTavish			
20a INFORMANT'S NAME (Type/Print) Ronald G. Phinney		20b MAILING ADDRESS (Street and Number or Rural Route Number, City or Village, State, ZIP Code) 1125 E. Second, Royal Oak, Michigan 48067				
21 METHOD OF DISPOSITION - Burial, Cremation, Removal, Donation, Other (Specify) Burial		22a PLACE OF DISPOSITION (Name of Cemetery, Crematory, or other place) Ottawa Park Cemetery		22b LOCATION - City or Village, State Independence Twp., MI		
23 SIGNATURE OF FUNERAL SERVICE LICENSEE <i>[Signature]</i>		24 LICENSE NUMBER (of Licensee) 6204	25 NAME AND ADDRESS OF FACILITY Kinsey-Garrett Funeral Home 420 S. Lafayette, Royal Oak, MI 48067			
26 PART I Enter the diseases, injuries, or complications that caused the death. Do NOT enter the mode of dying, such as cardiac or respiratory arrest, shock, or heart failure. List only one cause on each line. IMMEDIATE CAUSE (Final disease or condition resulting in death) → Carcinoma of lung DUE TO (OR AS A CONSEQUENCE OF) 7 months Sequentially list conditions, if any, leading to immediate cause. Enter UNDERLYING CAUSE (Disease or injury that initiated events resulting in death) LAST a _____ DUE TO (OR AS A CONSEQUENCE OF) b _____ DUE TO (OR AS A CONSEQUENCE OF) c _____ DUE TO (OR AS A CONSEQUENCE OF) d _____ DUE TO (OR AS A CONSEQUENCE OF)						
PART II Other significant conditions contributing to death but not resulting in the underlying cause given in Part I				27a WAS AN AUTOPSY PERFORMED? (Yes or No) No	27b WERE AUTOPSY FINDINGS AVAILABLE PRIOR TO COMPLETION OF CAUSE OF DEATH? (Yes or No)	
28 ACTUAL PLACE OF DEATH (Home, Nursing Home, Hospital, Ambulance) (Specify) Home		29 WAS CASE REFERRED TO MEDICAL EXAMINER? (Specify Yes or No) NO		31a (Check one only) <input type="checkbox"/> The case reviewed and determined not to be a medical examiner's case. <input type="checkbox"/> On the basis of examination and of investigation, in my opinion death occurred at the time, date and place and due to the cause(s) and manner stated. 31b DATE SIGNED (Mo., Day, Yr.) March 30, 1995		
30a To the best of my knowledge, death occurred at the time, date and place and due to the cause(s) stated. (Signature and Title) <i>[Signature]</i>		30c TIME OF DEATH 3:35 A M		31c CASE NUMBER		
30b DATE SIGNED (Mo., Day, Yr.) March 30, 1995		30d NAME OF ATTENDING PHYSICIAN IF OTHER THAN CERTIFIER (Type or Print)		31d PRONOUNCED DEAD (Mo., Day, Yr.) ON		
31e TIME OF DEATH M		32a NAME AND ADDRESS OF PERSON WHO COMPLETED CAUSE OF DEATH (ITEM 26) (Type or Print) Martin Schock, M.D., 1900 E. Twelve Mile, Ste. 205, Warren, MI		32b LICENSE NUMBER 027896		
33a ACC. SUICIDE, HOMICIDE, NATURAL OR UNUSUAL INVEST. (Specify) NATURAL		33b DATE OF INJURY (Mo., Day, Yr.)	33c TIME OF INJURY M	33d DESCRIBE HOW INJURY OCCURRED		
33e INJURY AT WORK (Specify Yes or No)		33f PLACE OF INJURY - At home, third street, factory, office building, etc. (Specify)		33g LOCATION - Street or RFD No. City, Village or Twp. State		
34a REGISTRAR'S SIGNATURE <i>[Signature]</i>				34b. DATE FILED (Month, Day, Year) MAR 31 1995		

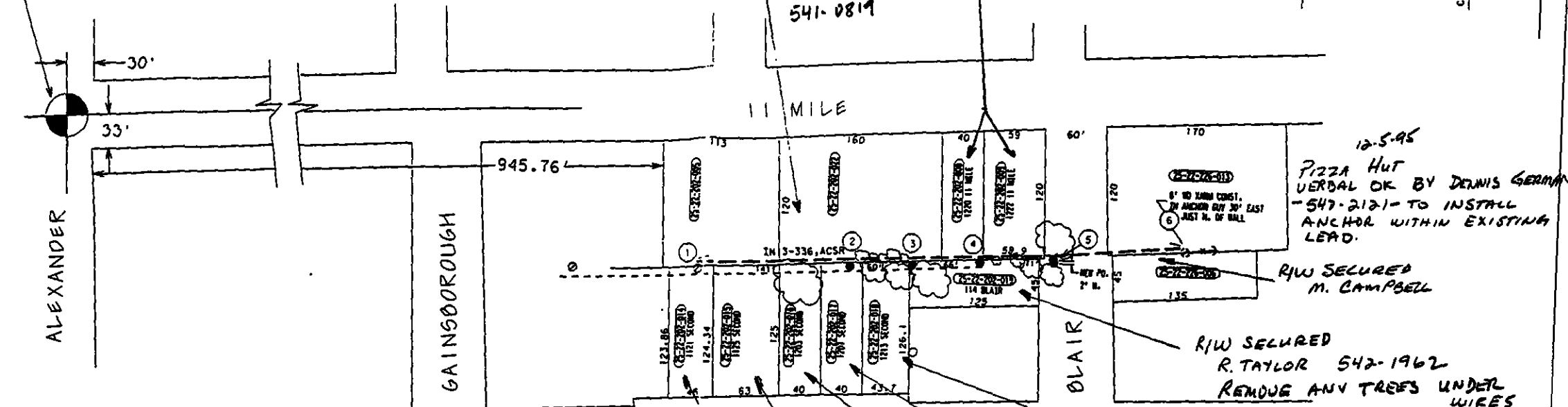
STATE OF MICHIGAN
COUNTY OF OAKLAND

I, Lynn D. Allen, County Clerk for the County of Oakland, Clerk of the Circuit Court thereof, the same being a court of Record, and having a Seal, do hereby certify that the foregoing is a copy of the record now remaining in my office.

In testimony whereof, I have hereunto set my hand and affixed the Seal of said Court this 8th day of January, 19 96

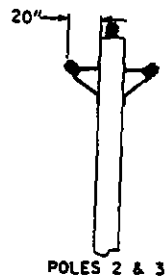
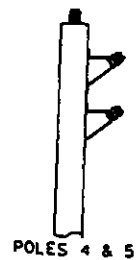
LYNN D. ALLEN, Clerk - Register of Deeds.
BY *[Signature]*
Deputy Clerk

N 1/4 COR.
SEC. 22



DETROIT EDISON IS REQUESTING RIGHT OF WAY TO EXTEND OVERHEAD PRIMARY WITH ARMLESS CONSTRUCTION FROM POLE 1 TO POLE 6. TRIMMING OF TREES WILL BE REQUIRED.

- ② ③ -RP EXISTING POLES WITH 45 FOOT POLES & ARMLESS CONSTRUCTION
- ④ ⑤ -RP EXISTING POLES WITH 50 FOOT POLES & ARMLESS CONSTRUCTION



RECEIVED RIGHT OF WAY NO. 46379-44386

LEGEND

- EXIST. D.E.CO. POLE
- PROPOSED POLE
- FOREIGN POLE
- EXIST. ANCHOR
- PROPOSED ANCHOR
- TREE
- 120/240 V LINE
- 4800 V LINE
- 13,200 V LINE
- 40,000 V LINE

THE DETROIT EDISON COMPANY-SERVICE PLANNING DEPARTMENT			
CITY OR TWP. ROYAL OAK	COUNTY OAKLAND	TWP SEC QTR 22 NE	DEPT. ORDER NO.
MAP SECT.	TOWN RANGE 1N. 11E	JOINT R/W REG'D 3612	R/W NO.
PROJECT NAME DC 2690 LINCOLN	TEL. ENGR. & DIST.	LAST MEMO	CATV MEMO
PLANNER M. RICCI	SCALE 1" = 100'	DATE 9-21-95	BUDGET ITEM NO. 5KR7A9/H008

* R/W SECURED K. JOHNS
542-9345
CALL BEFORE WORK IS STARTED
CUT LIMB OVER GARAGE. JPL 14810/15

R/W SECURED HOME - 546-8715
R. SWANEY - WORK. 571-8600
REMOVE TREE IN NW CORNER OF LOT.
CALL BEFORE WORK IS DONE

R/W SECURED R. PHINNEY
398-2752
REMOVE PINE TREE

R/W SECURED R. ELLISON

R/W SECURED G. BOYD 399-6922
REMOVE ALL CUTTING

R/W SECURED R. TAYLOR 542-1962
REMOVE ANY TREES UNDER WIRES

R/W SECURED M. CAMPBELL

12-5-95
PIZZA HUT
VERBAL OK BY DENNIS GERMAN
-547-2121- TO INSTALL ANCHOR WITHIN EXISTING LEAD.

R/W SECURED J. KATSIVELOS
541-5011
CUT WOOD INTO FIREPLACE LENGTH - REMOVE TRIMMING

R/W SECURED G. NELSON
REMOVE ALL CUTTINGS
541-0819