

I I IN CONSIDERATION of the sum of One Dollar (\$1.00) and other valuable considerations, receipt of which is hereby acknowledged, hereby grant to THE DETROIT EDISON COMPANY, its successors and assigns, the right to construct, operate and maintain its lines for the transmission and distribution of electricity and Company communication facilities, including the necessary poles, fixtures, guys and guy stubs, wires and equipment, and including also the right to trim or cut down any trees along said lines, which could fall into the lines or interfere in any way with their operation upon, over and across my property located in City of Troy

County of Oakland State of Michigan, and described as follows:
The West 6 feet of Lot 23 of Eyrists Dequindre Farms Subdn, #5, a part of the NE 1/4 of Section 24, Town 2 North Range 11 East as recorded in Libers 55 on Page 58 of Oakland County Records

The route of the lines shall be as follows: in a northerly and southerly direction, along the West line

The Company shall reimburse me for all damage to growing crops, buildings or fences, caused by its men, teams, trucks and other vehicles and equipment in entering said property for the purpose set forth herein.

In addition to the above consideration, the Company shall pay me the sum of FIFTY 00/100 (\$5.00) Dollars for each pole on said land, the same to be paid before any poles are erected. Death certificate attached and made a part hereof

Witness: Robert M. Boss
Robert M. Boss
Joseph M. Gajowiak
Joseph M. Gajowiak

1965 APR 7 PM 3 22
RETURNED TO REGISTER OF DEEDS RECORDS
MICHIGAN
JOHN D. MURPHY
CLERK - REGISTER OF DEEDS

(Signed) Mary Gajowiak
Mary Gajowiak survivor of herself and her deceased husband John R Gajowiak a/k/a John Gajowiak
38913 Deduindre, Troy, Mich.

Prepared by Robert M Boss
2000 Second Ave Detroit, Mich.

THE DETROIT EDISON COMPANY
By: A. L. Kasameyer
A. L. KASAMEYER, DIRECTOR
PROPERTIES AND RIGHTS-OF-WAY DEPARTMENT

STATE OF MICHIGAN
County of OAKLAND } s.s.

On this 27th day of July, A. D. 1964, before me, the undersigned, a notary public in and for said county, personally appeared MARY GAJOWIAK, SURVIVOR OF HERSELF AND HER DECEASED HUSBAND JOHN R. GAJOWIAK

known to me to be the person who executed the foregoing instrument, and acknowledged the same to be her free act and deed.
Robert M Boss
Robert M Boss
Notary Public W. H. H. H. County, Michigan.

My Commission expires Jan 4, 1967

RETURN TO
A. L. KASAMEYER
The Detroit Edison Company
2000 SECOND AVENUE
DETROIT 26, MICHIGAN

RECORDED
RIGHT
MAY NO
2017823-1

DETROIT DEPARTMENT OF HEALTH
Vital Statistics Division

LIBEL 4708 PAGE 216

CERTIFICATE OF DEATH

BIRTH No.		Local File No. 38712	
1. NAME OF DECEASED A. COUNTY Wayne		2. STATE Mich	
3. CITY (If outside Michigan State, write STATE and city)		4. DISTRICT (If outside Michigan State, write STATE and city)	
5. PLACE OF DEATH (If not in Michigan or institution, give street address or institution)		6. STREET ADDRESS	
7. NAME OF DECEASED (Type or Print) John Gajowiak		8. DATE OF DEATH March 4th 1962	
9. SEX Male	10. RACE White	11. MARRIAGE STATUS Married	12. AGE 67
13. OCCUPATION (Give kind or work other than that of husband, wife, or child)		14. TYPE OF BUSINESS OR INDUSTRY	15. CITIZENSHIP (Place of birth or naturalization)
16. PATIENT'S HOME Andrew Gajowiak		17. DECEASED'S HOME Rose Gajowiak	18. NAME OF MARRIAGE OR DATE OF DECEASED MARY Gajowiak
19. US BIRTH RECORD (If not, give year or date of arrival)		20. SOCIAL SECURITY NO. 376-09-5097	21. IMPORTATION NO. MARY Gajowiak
22. CAUSE OF DEATH			
I. PRESENT OR OBVIOUS CAUSE OF DEATH (If not, give date to which it is attributed)			
II. UNDERLYING CAUSE (If not, give date to which it is attributed)			
III. OTHER SIGNIFICANT CONDITIONS (If not, give date to which it is attributed)			
23. DATE OF OPERATION 3-2-62			
24. PLACE OF BIRTH (If not, give year or date of arrival)			
25. SEX OF BIRTH (If not, give year or date of arrival)			
26. I hereby certify that I obtained the deceased from _____ to _____ and that death occurred at _____ on _____ 1962, and that death occurred at _____ on _____ 1962.			
27. SIGNATURE OF REGISTRAR D.B. Ramsey, M.D. 5435 Woodward Ave. MAR 4 1962			
28. SIGNATURE OF PHYSICIAN Mary Szelucha 10410 Oakland Blvd. MAR 6 1962			
29. SIGNATURE OF DECEASED'S NEAREST RELATIVE Frank Gajowiak 10410 Oakland Blvd. MAR 6 1962			

I hereby certify that the foregoing is a true copy of the record on file in the Detroit Department of Health; attested by the raised seal of the City of Detroit.

RETURN TO
A. L. KASAMEYER
The Detroit Edison Company
2000 SECOND AVENUE
DETROIT 26, MICHIGAN

C.P. Chas. Wilson, M.D. Registrar

Division Head

Dated NOV 10 1964

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