

**CERTIFICATE of COMPLETION and OPENING
of a HIGHWAY for PUBLIC TRAVEL**

VTrans Use Only	
Certificate Year:	_____
Highway Class:	_____
Town Highway #:	_____
Mileage:	_____

_____, Clerk of the _____ of _____, Vermont.
(Clerk's Name) (City/Town/Village) (City/Town/Village)
(City/Town/Village Name)

Pursuant to Title 19, V.S.A., Chapter 7, this is to certify that the following described section of Class _____
(1,2,3 or 4)
 Highway in the _____ of _____ was COMPLETED AND OPENED
(City/Town/Village) (City/Town/Village Name)
 FOR PUBLIC TRAVEL on _____,
(Month - Day) (Year)

DESCRIPTION OF RIGHT OF WAY:
 (Include road name and intersecting town highway numbers)

and as shown on a Highway Map of the _____ of _____,
(City/Town/Village) (City/Town/Village Name)
 dated _____, _____, and filed in Book _____ on page _____ of the Records of
(Month - Day) (Year) (Book #) (Page #)
 the _____ of _____ by the _____ Clerk of said _____
(City/Town/Village) (City/Town/Village Name) (City/Town/Village) (City/Town/Village)
 incorporated herein by reference and attested to on said map by said _____ Clerk.
(City/Town/Village)

Dated at _____, County of _____ and State of Vermont,
(City/Town/Village Name) (County Name)
 this _____ day of _____, A.D., _____.
(Date - Day) (Date - Month) (Date - Year)

(Selectman/Alderman/Trustee Signature)

(Selectman/Alderman/Trustee Signature)

(Selectman/Alderman/Trustee Signature)

(Selectman/Alderman/Trustee Signature)

(Selectman/Alderman/Trustee Signature)

(Selectman/Alderman/Trustee Signature)

BOARD
 OF
 SELECTMEN,
 ALDERMAN,
 or TRUSTEES

(Manager/Mayor Signature)
 and the Manager/Mayor of the City/Town/Village of _____.
(City/Town/Village Name)

_____, VERMONT, _____,
(City/Town/Village Name) (Month - Day) (Year)

THE ABOVE IS A TRUE COPY OF THE DESCRIPTION OF CLASS _____ HIGHWAY COMPLETED AND OPENED
(1,2,3 or 4)
 FOR PUBLIC TRAVEL, RECORDED IN BOOK _____ ON PAGE _____ OF THE _____ RECORDS
(Book #) (Page #)
 OF THE _____ OF _____ ON THE _____ DAY OF _____,
(City/Town/Village) (City/Town/Village Name) (Date - Day) (Date - Month)
 _____, AT _____ O'CLOCK, _____ M.
(Date - Year) (Time) (A or P)

ATTEST: _____
(Clerk's Name)
 _____ CLERK OF _____, VERMONT
(City/Town/Village) (City/Town/Village Name)