

## Resolution for Improvement Under the Illinois Highway Code

Is this project a bondable capital improvement?			Resolution	Туре	Resolution Number	Section Number	
⊠ Yes □ No			Original			24-00368-00-RS	
BE IT RESOLVED, by the Council of the City							
Governing Body Type Local Public Agency Type							
of Aurora  Name of Local Public Agency	IIIi	nois tha	t the follow	ing describ	ped street(s)/road(s)/st	tructure be improved under	
the Illinois Highway Code. Work shall be done by	Contrac	et					
Contract or Day Labor  For Roadway/Street Improvements:							
Name of Street(s)/Road(s)	Length (miles)	Route		From		То	
Indian Trail Rd	1.13	FAU 1509		Kane/DuPage County Line E		Eola Rd	
For Structures:	•	'		•			
Name of Street(s)/Road(s)	Exist Structui				Location	Feature Crossed	
BE IT FURTHER RESOLVED,							
1. That the proposed improvement shall consist of							
Milling, patching, and resurfacing the existing roadway along with spot curb and gutter repairs, sidewalk repairs, ADA sidewalk ramp upgrades, and associated landscaping, pavement marking, and traffic control.							
Ties, Coldewall Tamp apgrades, and asse	olatoa le	1114000	iping, pav	omone n	idining, dira traine	, control.	
2. That there is hereby appropriated the sum of seven hundred eighty-five thousand and 00/100							
					\$785,000.00	$\frac{0}{2}$ ) for the improvement of	
said section from the Local Public Agency's allotment of Motor Fuel Tax funds.  BE IT FURTHER RESOLVED, that the Clerk is hereby directed to transmit four (4) certified originals of this resolution to the district office							
of the Department of Transportation.	ereby dire	cied to i	ıransmıt iou	ır (4) cerun	led originals of this res	solution to the district office	
of the Bepartment of Transportation.							
I, Jennifer Stallings	City						
Name of Clerk	Lc	cal Publ	ic Agency Ty	pe		Local Public Agency Type	
of Aurora in the State aforesaid, and keeper of the records and files thereof, as provided by							
Name of Local Public Agency statute, do hereby certify the foregoing to be a true, perfect and complete original of a resolution adopted by							
Council of Au	, I				, ,	n November 26, 2024 .	
Governing Body Type		e of Loca	al Public Age	ncy		Date	
IN TESTIMONY WHEREOF, I have hereunto set	my hand	and sea	l this	day of			
,	,		Day	<u> </u>	Month, Year		
(SEAL, if required by the LPA)				Cle	Clerk Signature & Date		
	Approved						
				Re	Regional Engineer Signature & Date		
					Department of Transportation		