Illinois Department of Transportation

**Resolution for Improvement
Under the Illinois Highway Code**

Is this project a bondable capital improvement?

☒ Yes ☐ No

Resolution Type	Resolution Number	Section Number
Supplemental		06-00260-02-PV

BE IT RESOLVED, by the _Council_ of the _City_
          Governing Body Type   Local Public Agency Type

of _Aurora_   Illinois that the following described street(s)/road(s)/structure be improved under
          Name of Local Public Agency

the Illinois Highway Code. Work shall be done by _Contract_ .
                                    Contract or Day Labor

For Roadway/Street Improvements:

Name of Street(s)/Road(s)	Length (miles)	Route	From	To
Indian Trail	0.4	FAU 1503	Mitchell Road	Church Road

For Structures:

Name of Street(s)/Road(s)	Existing Structure No.	Route	Location	Feature Crossed

BE IT FURTHER RESOLVED,

1. That the proposed improvement shall consist of

the land acquisition purchases for the Indian Trail Road Reconstruction and High Street Intersection project.

2. That there is hereby appropriated the sum of _two hundred twenty four thousand seven hundred and 00/100-----------_

_---_ Dollars (_$224,700.00_) 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.

I, _Jennifer Stallings_   _City_   Clerk in and for said _City_
         Name of Clerk   Local Public Agency Type   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 _Aurora_   at a meeting held on _February 28, 2023_ .
    Governing Body Type   Name of Local Public Agency   Date

IN TESTIMONY WHEREOF, I have hereunto set my hand and seal this _____ day of _____ .
                                                  Day   Month, Year

(SEAL, if required by the LPA)

Clerk Signature & Date

Approved

Regional Engineer Signature & Date
Department of Transportation