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		23-00359-00-TL

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
Farnsworth Avenue	1.99	FAU 0360	I-88	Sheffer Rd

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

Phase I Engineering Supplement for traffic signal modernization for the 8 signals from I-88 to Sheffer Rd, resurfacing from north of Molitor Rd to Creek Ave, a multi-use path from Illinois Prairie Path to Creek Ave, ADA ramp improvements, and associated work.

2. That there is hereby appropriated the sum of **eighty-five thousand and 00/100**---
--- Dollars (**$85,000.00**) 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 **November 26, 2024** .

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