## RECORDING NOT REQUIRED



## Resolution for Improvement Under the Illinois Highway Code

Is this project a bondable capital improvement?			Resolution	Туре	Resolution Number	er Section Number	
Yes No			Original		2023- 33	21-0036-00-BT	
BE IT RESOLVED, by the City Council			<del></del>	of the	City		
Governing Body Type Local Public Agency Type							
of _Troy, IL	199	nois tha	at the followi	ng descr	ibed street(s)/road(s)	/structure be improved under	
Name of Local Public Agency the Illinois Highway Code. Work shall be done by	V		*				
	Contrac	t or Day	Labor				
For Roadway/Street Improvements:	I amouth	ř –		· ·			
Name of Street(s)/Road(s)	Length (miles)	Route		From		То	
US 40 Bike Trail	.53	US 40		S. Main Street		Creekside	
For Structures:							
Name of Street(s)/Road(s)	Exist Structur			Location		Feature Crossed	
BE IT FURTHER RESOLVED,							
1. That the proposed improvement shall consist of  The project consists of preliminary engineering to construct a bike trail and all necessary work to complete project.							
The project consists of premimary engineering to co	nandor a on	to train a	ing an noods	ary work.	to complete project.		
That there is hereby appropriated the sum of Seventy-eight thousand eight hundred sixteen							
2. That there is hereby appropriated the sum of	Bovenity-or	giii dioc		ollars ( 78		) for the improvement of	
said section from the Local Public Agency's Gen	eral Reven	ue -		ollars (	0,010		
BE IT FURTHER RESOLVED, that the Clerk is I			transmit fou	г (4) certi	ified originals of this i	resolution to the district office	
of the Department of Transportation.							
Kim Thomas	City			Clerk in and for said		City	
Name of Clerk			lic Agency Ty	Гуре		Local Public Agency Type	
of Troy, IL	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  City Council at a meeting held on 8/7/2023							
City Council of C	of City of Troy  Name of Local			ncv	Date		
IN TESTIMONY WHEREOF, I have hereunto se			al this प्रा	day of	f AUGUST 2023 Month, Year	*	
(SEAL, if required by the LPA)			Day		Clerk Signature & Dat	9	
(SEAL, II required by the LFA)					)	(1)	
(1.01.140					Kimbuly Js	omas 8.7.2023	
C KNIZENT &					Approved Regional Engineer Signature & Date		
				<u>E</u>	Department of Transp	ortation	
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