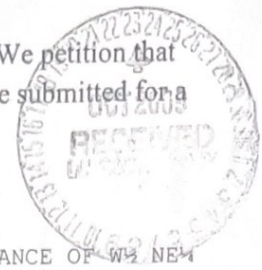


WE, THE UNDERSIGNED are qualified voters in the area herein described. We petition that the question of forming the Apple Springs Water Works Sanitary District be submitted for a vote of the approval or rejection pursuant to law.



Legal Description:

APPLE SPRINGS TRACT LOCATED IN: NE $\frac{1}{4}$ NW $\frac{1}{4}$ LESS ROW; UNPLATTED BALANCE OF NW $\frac{1}{4}$ NE $\frac{1}{4}$ LYING NORTH OF US HWY 14-A ROW; UNPLATTED BALANCE SE $\frac{1}{4}$ NW $\frac{1}{4}$ LYING NORTH OF US HWY 14-A ROW; OF SECTION 14, T5N, R4E BHM AND SE $\frac{1}{4}$ SW $\frac{1}{4}$; N $\frac{1}{2}$ SW $\frac{1}{4}$; E $\frac{1}{2}$ NW $\frac{1}{4}$; SW $\frac{1}{4}$ NW $\frac{1}{4}$; UNPLATTED BALANCE OF THE SW $\frac{1}{4}$ SW $\frac{1}{4}$ OF SECTION 11, T5N, R4N, BHM ALL LOCATED IN LAWRENCE COUNTY, SOUTH DAKOTA.

THE SW $\frac{1}{4}$ NW $\frac{1}{4}$, W $\frac{1}{2}$ SW $\frac{1}{4}$ OF SECTION 2, E $\frac{1}{2}$ NE $\frac{1}{4}$ OF SECTION 14 EXCLUDING LOT H2, LOT D REVISED OF THE SW $\frac{1}{4}$ NW $\frac{1}{4}$ OF SECTION 13 AS SHOWN ON PLAT #1985-759 EXCLUDING LOT H1, ALL LOCATED IN T5N, R4E, BHM, LAWRENCE COUNTY, SOUTH DAKOTA.

- The purpose of the district is to own and operate a water system and waste water system within the district.
- The location of the principal place of business of the district will be 12254 Reunion Ridge Road, Sturgis, SD, 57785

FILED

INSTRUCTIONS TO SIGNERS:

1. Signers of this petition must individually sign their names in the form in which they are registered to vote or as they usually sign their names.
2. Before the petition is filed, each signer or the circulator must add the residence address of the signer and the date of signing. If the signer is a resident of a second or third class municipality, a post office box may be used for the residence address.
3. Before the petition is filed, each signer or the circulator must print the name of the signer in the space provided and add the county of voter registration.
4. Abbreviations of common usage may be used. Ditto marks may not be used.
5. Failure to provide all information requested may invalidate the signature.

NAME		RESIDENCE	DATE/COUNTY
SIGN	<i>[Signature]</i>	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
1	<i>David Simpson</i>	12257 Stagecoach Trail	10-22-09
PRINT	David Simpson	CITY OR TOWN	COUNTY OF REGISTRATION
		Sturgis	Lawrence
SIGN	<i>[Signature]</i>	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
2	<i>Valerie S. Simpson</i>	12257 Stagecoach Trail	10-22-09
PRINT	Valerie S. Simpson	CITY OR TOWN	COUNTY OF REGISTRATION
		Sturgis	Lawrence
SIGN	<i>[Signature]</i>	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
3	<i>Karen E Marsden Keyser</i>	20640 Apple Springs Blvd	10-23-09
PRINT	Karen E Marsden Keyser	CITY OR TOWN	COUNTY OF REGISTRATION
		Sturgis, SD 57785	Lawrence
SIGN	<i>[Signature]</i>	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
4	<i>William C Keyser</i>	20640 Apple Springs Blvd	10-23-09
PRINT	William C. Keyser	CITY OR TOWN	COUNTY OF REGISTRATION
		Sturgis, SD 57785	Lawrence
SIGN	<i>[Signature]</i>	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
5	<i>Ramona K Irwin</i>	30710 Rendezvous Ct	10-23-09
PRINT	Ramona K. Irwin	CITY OR TOWN	COUNTY OF REGISTRATION
		Sturgis, SD 57785	Lawrence
SIGN	<i>[Signature]</i>	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
6	<i>Fredrick R. Tryng</i>	20710 Rendezvous Ct	10-23-09
PRINT	Fredrick R. Tryng	CITY OR TOWN	COUNTY OF REGISTRATION
		Sturgis, S.D. 57785	Lawrence
SIGN		STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER	DATE OF SIGNING
7			
PRINT		CITY OR TOWN	COUNTY OF REGISTRATION

NAME	RESIDENCE	DATE/COUNTY
SIGN _____ 8 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 9 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 10 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 11 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 12 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 13 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 14 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 15 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 16 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 17 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 18 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 19 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____
SIGN _____ 20 PRINT _____	STREET AND NUMBER OR RURAL ROUTE AND BOX NUMBER _____ CITY OR TOWN _____	DATE OF SIGNING _____ COUNTY OF REGISTRATION _____

VERIFICATION BY PERSON CIRCULATING PETITION

INSTRUCTIONS TO CIRCULATOR: This section **must** be completed following circulation and before filing.

David Simpson 12257 Stasecoach Trail Sturgis SD
 Print name of the circulator Residence Address City State

I, under oath, state that I circulated the above petition, that each signer personally signed this petition in my presence, and that either the signer or I added the printed name, the residence address of the signer, the date of signing, and the county of voter registration.

Sworn to before me this 23 day of October
 (Seal)
 My Commission Expires _____
 MY TERM EXPIRES
 MARCH 6, 2011

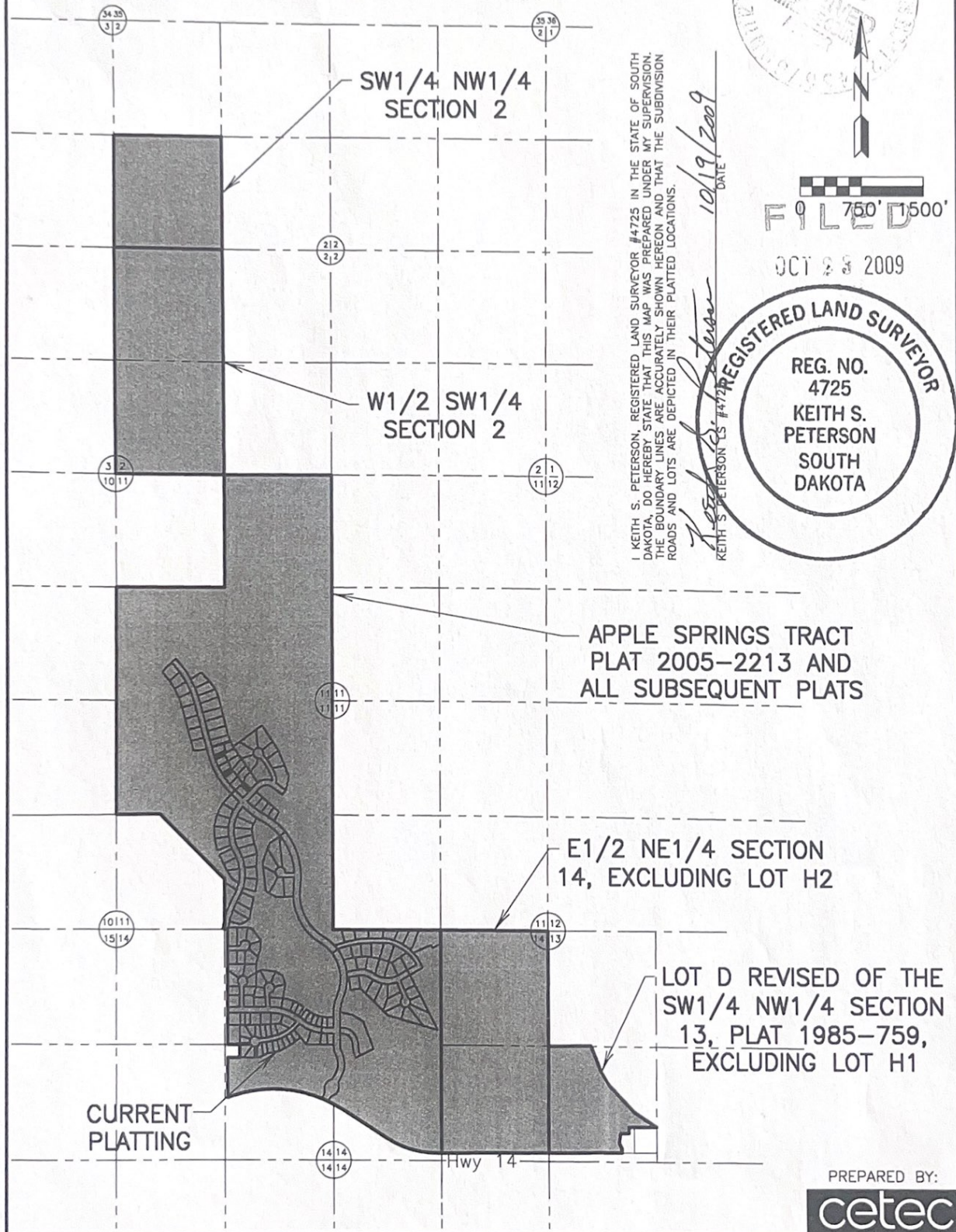


Signature of Circulator

Signature of Officer Administering Oath

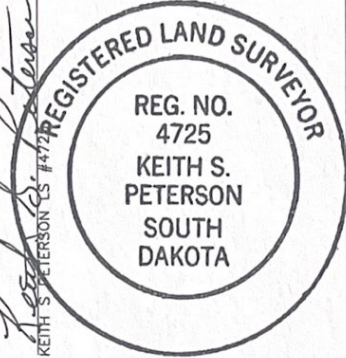
Title of Officer Administering Oath

EXHIBIT "A"
APPLE SPRINGS SANITARY DISTRICT MAP,
LOCATED IN T5N, R4E, BHM.
LAWRENCE COUNTY, SOUTH DAKOTA



I, KEITH S. PETERSON, REGISTERED LAND SURVEYOR #4725 IN THE STATE OF SOUTH DAKOTA, DO HEREBY STATE THAT THIS MAP WAS PREPARED UNDER MY SUPERVISION. THE BOUNDARY LINES ARE ACCURATELY SHOWN HEREON AND THAT THE SUBDIVISION ROADS AND LOTS ARE DEPICTED IN THEIR PLATTED LOCATIONS.

Keith S. Peterson
 KEITH S. PETERSON LS #4725
 DATE 10/19/2009



PREPARED BY:

cetec