

# EXHIBIT "A"

\_\_\_\_\_ County

\_\_\_\_\_ Municipality

**Township Street or Road:**

Road or Street Name: \_\_\_\_\_

TR NO. \_\_\_\_\_

**Street or Road Length To Be Covered By Agreement:** \_\_\_\_\_

Beginning at: \_\_\_\_\_

Ending at: \_\_\_\_\_

**UPPER SAUCON TOWNSHIP ADOPT-A-ROAD PROGRAM**

**ORGANIZATIONAL IDENTIFYING SIGN IS TO READ:**

\_\_\_\_\_  
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