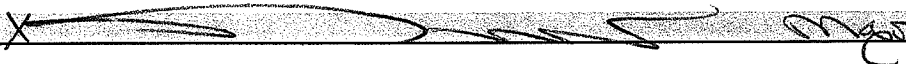



**SIGNATURES OF PROPERTY OWNERS
IN SUPPORT OF HISTORIC DISTRICT EXPANSION**

Subdivision Name SOUTHRIDGE	Lot 5-6	Block 9	
Property Address 1310 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 1601 N Blackwelder Ave	City OKC	State OK	Zip Code 73106
Owner of Record (Printed Name) BOGERT, BRIAN	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p> <p>Signature: X <i>Brian Bogert</i></p>			

Subdivision Name SOUTHRIDGE	Lot 7-8	Block 9	
Property Address 1314 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address WHITE & WHITE LLC C/O DEBBIE R WHITE CPA 1680 SW 86TH ST	City OKLAHOMA CITY	State OK	Zip Code 73159
Owner of Record (Printed Name) WHITE & WHITE LLC	Signatory Name if different from Owner of Record(Printed Name) <i>Debbie White manager</i>		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
Signature: 			

Subdivision Name SOUTHRIDGE	Lot 11-12-13	Block 9	
Property Address 1318 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address	City	State	Zip Code
Owner of Record (Printed Name) BROWN, GREG D	Signatory Name if different from Owner of Record(Printed Name)		

I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.

Signature: 

Subdivision Name SOUTHRIDGE	Lot 14-15	Block 9	
Property Address 1320 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 710 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Owner of Record (Printed Name) HOLLRAH, DEBBIE A	Signatory Name if different from Owner of Record(Printed Name)		

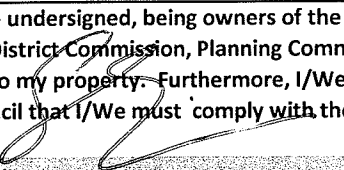
I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.

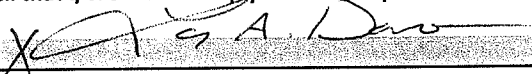
Signature: X *Debbie A Hollrah*

Subdivision Name SOUTHRIDGE	Lot 16, 17 & 18	Block 9	
Property Address 1336 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address	City	State	Zip Code
Owner of Record (Printed Name) WHITAKER, PATRICK G	Signatory Name if different from Owner of Record(Printed Name)		
<i>WHITAKER PATRICK G</i>	<i>[Signature]</i>		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
<p>Signature: <i>[Signature]</i></p>			

Subdivision Name SOUTHRIDGE	Lot 19-20	Block 9	
Property Address 1350 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 1321 REGENT	City NORMAN	State OK	Zip Code 73069
Owner of Record (Printed Name) MASSEY, DOROTHY ANN- REV LIV TRT MARTIN, CYNTHIA MARIE- TRTEE	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p> <p>Signature: _____</p>			

Subdivision Name SOUTHRIDGE	Lot 21-22	Block 9	
Property Address 1352 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 208 KENSINGTON	City MADISON- VILLE	State LA	Zip Code 70447
Owner of Record (Printed Name) COLLINS, JOHN P V & LAURA A	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p> <p>Signature: _____</p>			

Subdivision Name SOUTHRIDGE	Lot 23 AND 24	Block 9	
Property Address 1358 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 3575 JOSHUA LN	City OKLAHOMA CITY	State OK	Zip Code 73165
Owner of Record (Printed Name) EISER, SAM H	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
<p>X Signature: </p>			

Subdivision Name SOUTHRIDGE	Lot 25 AND 26	Block 9	
Property Address 1380 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address PO BOX 37	City SHAWNEE	State OK	Zip Code 74802
Owner of Record (Printed Name) DAVIES, LARRY ALLEN	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
<p>Signature: </p>			

Subdivision Name SOUTHRIDGE	Lot 27-28	Block 9	
Property Address 1384 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address PO BOX 722760	City NORMAN	State OK	Zip Code 73070
Owner of Record (Printed Name) MCILHANEY, NOVA HOMES LLC	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
Signature:			

Subdivision Name SOUTHRIDGE	Lot 29-30 & N/2 LOT 31	Block 9	
Property Address 1386 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address	City	State	Zip Code
Owner of Record (Printed Name) ALLEN, BESSIE JANE	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
Signature:			

Subdivision Name SOUTHRIDGE	Lot S 1/2 LOT 31 ALL LOTS 32-33	Block 9	
Property Address 1400 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address	City	State	Zip Code
Owner of Record (Printed Name) WEICHBRODT, JO ANITA- REV LIV TRT	Signatory Name if different from Owner of Record(Printed Name)		

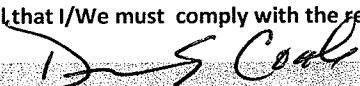
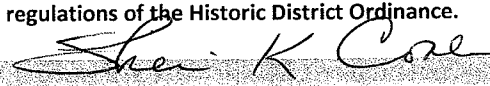
I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.

Signature: *Jo Anita Weichbrodt*

Subdivision Name SOUTHRIDGE	Lot 34-35	Block 9	
Property Address 1500 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 925 HOOVER ST	City NORMAN	State OK	Zip Code 73072
Owner of Record (Printed Name) CALONKEY TRUST	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p>			
Signature:			

Subdivision Name SOUTHRIDGE	Lot 36-37	Block 9	
Property Address 1600 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address 817 FLAMING OAKS DR	City NORMAN	State OK	Zip Code 73026
Owner of Record (Printed Name) COALE, SHERRI K & DANE S	Signatory Name if different from Owner of Record(Printed Name)		

I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council, that I/We must comply with the requirements and regulations of the Historic District Ordinance.

Signature:  

Subdivision Name SOUTHRIDGE	Lot LOTS 38 THRU 41	Block 9	
Property Address 1602 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address	City	State	Zip Code
Owner of Record (Printed Name) WARNKEN, CHARLES G	Signatory Name if different from Owner of Record(Printed Name)		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p> <p>Signature:</p>			

Subdivision Name SOUTHRIDGE	Lot 42-46	Block INC BLK 9	
Property Address 1604 CLASSEN BLVD	City NORMAN	State OK	Zip Code 73071
Mailing address if different from Property Address C/O AMERITRUST CORP 4506 HARVARD AVE	City TULSA	State OK	Zip Code 74135
Owner of Record (Printed Name) HAMMONS PROPERTIES, LLC	Signatory Name if different from Owner of Record(Printed Name) x Janet Diane Hammors		
<p>I/We, the undersigned, being owners of the above described property, do hereby request and petition the Historic District Commission, Planning Commission, and the City Council to apply the Historic District Zoning Overlay to my property. Furthermore, I/We understand that if the Historic District Overlay is approved by the City Council that I/We must comply with the requirements and regulations of the Historic District Ordinance.</p> <p>Signature: <i>Janet Diane Hammors</i></p>			