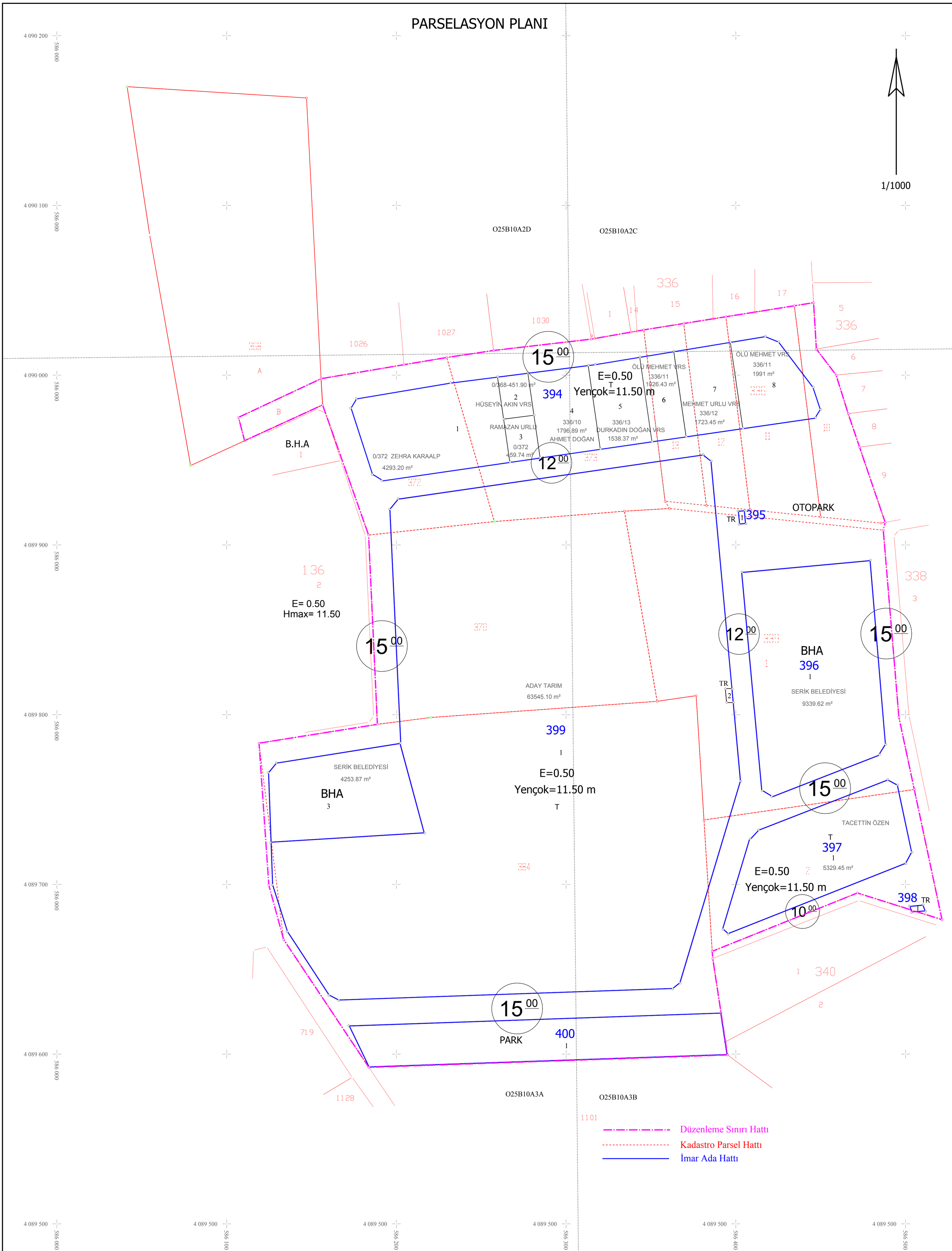
PARSELASYON PLANI



	DÜZENLEYEN	UYGUNDUR		KADASTRO MÜDÜRLÜĞÜ
		BELEDİYE/ÖZEL İDARE/PROJE İDARESİ		
		KONTROL EDEN	ONAYLAYAN	KONTROL EDEN
ADI SOYADI				
TARİH				
İMZA				