

## **COMMUNITY DEVELOPMENT**

PLANNING & ZONING 201 East Broadway Excelsior Springs, MO 64024 Phone: (816) 630-0756

Fax: (816) 630-9572

FOR OFFICE USE ONLY			
Fee: <b>\$95.00</b>			
Date	Received:		
Public	Notice	Date:	

## **Easement Vacate Application**

Applicant Name (Please Print):			
Addre	ess:		
Phone	<b>:</b>	Email:	
Prope	erty Survey Preparer:		
Addre	ess:		
Phone	<b>::</b>	Email:	
Prope	erty Location & Legal Description (a	attach on a separate sheet if necessary):	
	included: Property survey/site plan. (Three land	rge + one 11x17 or smaller)	
•	Notarized letter requesting vacation	of easement, street, alley or common-way.	
•	Proof of ownership of the property complete and correct legal description	y, i.e. WARRANTY DEED or a TITLE REPORT with the on for the subject property.	
•	• Copies of any covenants or deed restrictions pertaining to the subject property.		
•		y owners within 200' feet of the subject property. This either the County Assessor's office or a local title company.	
The va	acated property shall revert to the own	ers of the adjacent lots.	
Applio	cant Signature:	Date:	