



City of Centerville 1880 Main Street, Centerville MN Phone: 651-429-3232 Fax: 651-429-8629

For Office Use Only	Right of Way/Easement Vacation Application & Checklist
Fee Paid: _____	
Escrow Paid: _____	

Procedure for processing Right of Way/Easement Vacation request: Once Application is completed, fees paid, a Public Hearing will be scheduled before the Planning & Zoning Commission. If recommended for approval, it will be forwarded to City Council for action.

In order to retain use of certain Right of Way(s)/Easements it may not be advisable for the City of Centerville to allow the request (buried pipes, utility lines, overhead lines, etc.). In consideration of vacating the drainage and utility easements as herein requested, the undersigned hereby jointly and severally waive any and all claims for any damages resulting from the vacating and discontinuing of said drainage and utility easement.

Name of Development: _____

Property Information:

Street Address of Property: _____ P.I.D. #: _____

Legal Description
(Please attach description if lengthy) _____

Applicant (Applicant will receive all correspondence from the City):

Developer: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Cell: (_____) _____ Email: _____

Signature of Applicant: _____ Date: _____

Engineer/Surveyor:

Company: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Cell: (_____) _____ Email: _____

Property Owner(s):

Company: _____ Contact Person: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: (_____) _____ Cell: (_____) _____ Email: _____

Affidavit of Ownership (Application must be signed by all owners in fee title of the land containing the easement/right-of-way)

That I(we) am(are) the owner(s) of the property for which a land use approval is sought or have the lawful Power of Attorney therefore. **All signatures must be notarized.** If signing with Power of Attorney, a copy of the document giving you Power of Attorney must be attached to this application. If there are additional property owners, please attach a separate sheet to provide the above information. **All property owners must sign.**

PRINT Name of property owner & PID: _____

Signature: _____ Date: _____

STATE OF MINNESOTA)

) ss.

(Individual Notary)

COUNTY OF ANOKA)

On this _____ day of _____, _____, before me, a Notary Public, personally appeared _____

and, _____ who signed the foregoing instrument and acknowledge said instrument to be their free act and deed.

Notary Public

Stamp

ALL OF THE FOLLOWING INFORMATION MUST BE SUBMITTED

- _____ Completed application signed by all owners, in fee title, of the property containing the easements.
- _____ Proof of ownership by either a copy of a deed, abstract of title, or attorney's opinion.
- _____ Fees per the current Fee Schedule