



Planning Department
970-224-3211

VACATION OF RIGHT-OF-WAY OR EASEMENT

Public roads, alleys, and easement with rights, interests, or title of the Town may be vacated after consideration at a public hearing by the Planning Commission and then the Town Council.

APP.	TOWN
<input type="checkbox"/> Pre-Application Conference Discuss Town regulations and standards, application / review process, submittal requirements, and schedule. Full provisions of the Vacation of Right-of-Way and Other Public Easements are in the Code at §2.9.12.	<input type="checkbox"/>
Application Fee; CK#: _____ ; Amt: \$150 <small>Due within 72 hours of submittal by check or with the submittal online at https://www.colorado.gov/apps/payport/online/selectServiceType.jsf</small>	<input type="checkbox"/>
<input type="checkbox"/> Signed Fee Agreement; CK#: _____ ; Amt: \$150 <small>Due within 72 hours of submittal by check or with the submittal online at https://www.colorado.gov/apps/payport/online/selectServiceType.jsf</small>	<input type="checkbox"/>
<input type="checkbox"/> Poudre Fire Authority Development Review Fee of \$250 <small>Due within 72 hours of submittal by check or with the submittal online at https://www.colorado.gov/apps/payport/online/selectServiceType.jsf</small>	<input type="checkbox"/>
<input type="checkbox"/> Current Title Commitment Dated less than 30 days from date of vacation application submittal.	<input type="checkbox"/>
<input type="checkbox"/> Vacation Site Plan <u>General Instructions</u> Must be prepared by or under direct supervision of a registered land surveyor and meet State requirements. Show lengths to nearest 100 th of a ft. and bearings in degrees, minutes and seconds. Perimeter survey description of proposed plat must include at least 1 tie to an existing section monument of record and a description of monuments. Survey error cannot be greater than 1/10,000. Bearings, distances and curve data of all perimeter boundary lines must be indicated outside boundary line with lot dimensions. <u>Plat must include the following information</u> _ Title of project..... _ North arrow, scale (not greater than 1"=100') and preparation date..... _ Vicinity map..... _ Legal description..... _ Basis for establishing bearing _ Names and addresses of owners, applicant, designers, engineers and surveyors..... _ Total acreage..... _ Bearings, distances, chords, radii, central angles and tangent links for the perimeter and all lots, blocks, rights-of-way and easements..... _ Parcels excepted from inclusion noted as "not included in this plat" and the boundary completely indicated by bearings and distances..... _ Existing rights-of-way in and adjacent to property (labeled and dimensioned)..... _ Existing easements and their type in and adjacent to property (labeled and dimensioned)..... _ Location of area(s) to be vacated and hatch the area..... _ Location and description of monuments..... _ Floodplain boundary & source of information (if one does not exist on the property, state on plat)..... _ Blocks for approval signatures (owner, surveyor, utility providers, and Town office)..... _ Map showing how the vacated property will be apportioned.	<input type="checkbox"/>
<input type="checkbox"/> Narrative Written description explaining the proposed vacation and justification of why the proposal is necessary. Existing utilities (if any) and whether or not such utilities will be relocated or remain.	<input type="checkbox"/>

Submit documents above with a copy of this form and a completed Land Use Application.

Date Submitted to Town: _____



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VACATION OF RIGHT-OF-WAY

APP.	TOWN
<p>Application Certification of Completion Town must certify application is complete and in compliance with all submittal requirements OR reject it as incomplete and notify Applicant of any deficiencies. If rejected, Staff must prepare a report identifying any issues of concern that must be addressed and forward it to the Applicant. All documents requiring a signature must be signed in BLUE INK.</p>	<input type="checkbox"/>
<p><input type="checkbox"/> Address Staff Comments if necessary _ Letter explaining how all of the comments have been addressed _ Revised map and other documents as appropriate</p>	<input type="checkbox"/> - -

Contact information: *(please attach any additional contacts)*

Owner: _____	Telephone: _____
Address: _____	Fax: _____
_____	E-mail: _____
Applicant: _____	Telephone: _____
Address: _____	Fax: _____
_____	E-mail: _____

Property Description:

Address or Location: _____

Existing Zoning: _____ Existing Use: _____

Proposed Zoning: _____ Proposed Use: _____

Certification: *Must be signed with BLUE INK.*

OWNER CERTIFICATION OF COMPLETED APPLICATION

Signed: _____ Date: _____

APPLICANT CERTIFICATION OF COMPLETED APPLICATION

I certify that the information and attachments I have submitted are true and correct to the best of my knowledge. In filing this application, I am acting with the knowledge and consent of the property owners. I understand that all materials and fees required by the Town of Timnath must be submitted prior to having this application processed.

Signed: _____ Date: _____