CITY OF BONNERS FERRY

PETITION TO VACATE
RIGHTS OF WAY
(IDAHO CODE - TITLE 50)

Applicant's Name:_____ **Date:**_____

Mailing Address:_____

Day Telephone Number: (___)_____ E-mail Address:_____

Applicant's Name:_____ **Date:**_____

Mailing Address:_____

Day Telephone Number: (___)_____ E-mail Address:_____

Applicant's Representative:_____

Company _____

Mailing Address:_____

Day Telephone Number: (___)_____ E-mail Address:_____

DESCRIPTION:

Subdivision Name: _____ **Instrument #**_____

Block Number _____ **Lot Number(s)**_____ **Book of Plat No.**_____ **Pages:** _____

Quarter: _____ **Section:** _____ **Township:** _____ **Range:** _____

Location of Property: (*Street Address or cross streets*) _____

Parcel or Tax Lot Number (*if available*) _____
                                    (This information can be obtained from County Assessor's Office)

REQUEST
(If more space is needed, please use additional paper)

Please explain why the vacation is necessary:

_____

_____

_____

_____

Please explain why this vacation is in the interest of the public to vacate:

_____
_____
_____
_____

Are there any utilities within the existing right-of-way? If yes, please explain _____

_____
_____
_____
_____

Will any utilities remain in the same location if the vacation is approved? If yes, please explain: _____

_____
_____
_____
_____

Does that applicant propose to provide any easements as part of the vacation? If yes, please explain: _____

_____
_____
_____
_____

Title to Vacated Portion to be Vested With: _____;
And _____

I (we), the undersigned, do hereby petition the City of Bonners Ferry to vacate the right of way described in this application and do certify that all information, statements, attachments and exhibits submitted herewith are true to the best of my (our) knowledge.

_____   _____, 20 ____
Applicant Signature   Date

_____   _____, 20 ____
Applicant Signature   Date