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:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Vacation Petition Instructions, City of Bonners Ferry
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