



Internal Use Only:	
Case No.	_____
Date Filed	_____

Right-of-Way Vacation Application

Applicant Information

Attach a Letter of Agency if the Applicant is not the property owner.

Name * _____

Mailing Address * _____

City, State & Zip Code * _____

Telephone Number(s) * _____

Email Address _____

Surveyor Information

Name * _____

Mailing Address * _____

City, State & Zip Code * _____

Telephone Number(s) * _____

Email Address _____

Location and Lot Information

Legal Description * _____

Total Area * _____ Acres

Requirements and Documentation

- 1) A copy of the Butler County Auditor's tax map that shows the subject of the application
- 2) A survey of the property and any buildings, pavements, easements, utilities, or other improvements and property rights in or near to the property that are likely to be considered in the decision, prepared by a surveyor licensed in the State of Ohio (must be to scale and on paper no larger than 11 x 17 inches)
- 3) A legal description prepared by a surveyor licensed in the State of Ohio
- 4) A written description of the request including:
 - a) The reason for the request
 - b) A description of why the vacation will not cause harm to the public welfare, or if it will, what the applicant will do to mitigate any such harm

Fees & Receipt

The fee is \$30.

Sign and Date

Applicant Signature * _____

Date * _____

Submit Application, Plans and Documentation, and Fees

We will not accept incomplete applications and/or plans and documentation.

Send or drop off this application, all required attachments, and a check for fee and postage charges made payable to **City of Oxford**, to Community Development Director, 15 South College Avenue, Oxford, OH 45056.

Direct questions to the Community Development Department at (513) 524-5204.

Note: In order for a right-of-way vacation to be valid, the applicant shall contact the City of Oxford Community Development Department with the volume and page number for all legal instruments recorded in support of the vacation.

For Staff Use Only

Fee Paid Date * _____

Receipt Number * _____

Volume/Page Number * _____