

REQUEST TO VACATE

Date: _____

To: Durand Village Board of Trustees

From: _____

We are requesting that the Durand Village Board vacate _____
_____.

The name, address and PIN of the affected adjoining property owners are listed below.

Name(s): _____	_____
Address: _____	_____
City/State/Zip: _____	signature(s)
PIN(s): _____	

Name(s): _____	_____
Address: _____	_____
City/State/Zip: _____	signature(s)
PIN(s): _____	

Name(s): _____	_____
Address: _____	_____
City/State/Zip: _____	signature(s)
PIN(s): _____	

Name(s): _____	_____
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City/State/Zip: _____	signature(s)
PIN(s): _____	