City of Idaho Falls Engineering Division
PO BOX 50220
Idaho Falls, ID 83405-0220
www.idahofallsidaho.gov (208) 612-8250

Application for Vacation

Owner Information, hereafter "APPLICANT"		
Owner/Entity Name:		Phone:
Authorized Signatory:		Title:
Address:		Fax:
City:	State:	Zip:
Email:		
APPLICANT's Agent Information		
Company:		
Contact Name:		Phone:
Address:		Fax:
City:	State:	Zip:
Email:		
Vacation Type (Select all that apply:)		
☐ Easement	☐ Right-Of-Way	☐ Alley

Below is a list of all property owners adjoining the requested vacation. I, the APPLICANT, have provided an affidavit of consent to vacate form to all such owners, and have indicated below whether or not each form is attached to this application. I understand that failure to obtain consent from all adjoining owners and/or benefited users may significantly increase the time required to process this application and could result in a default denial.

Adjoining Property Owners	Affidavit for Consent Attached YES	NO
	☐	☐
	☐	☐
	☐	☐
	☐	☐
	☐	☐
	☐	☐
	☐	☐

Engineering Information	
General Description of Area to be Vacated: (i.e. Street, Alley, Address, Easement Location)	
Signature of Applicant(s)	
	Date:
	Date:

Required Attachments
Affidavit of Consent To Vacate: To be signed by the property owner(s) for whom this application is made. Affidavits from all other adjoining owners will assist in the timely processing of the vacation request.
Legal Description: Please submit the attached legal description form to the Engineering Division and email the legal description(s) in an electronic format (MS Word) to wgrote@idahofalls.gov
Vacation Exhibit Map: Please submit a legible 8 ½" x 11" or 11"x17" exhibit map outlining the area being vacated.

Application Fee: Three hundred fifty dollars ($350) due with the completed application *Cost Code: 001-0000-341-0200*

FOR CITY USE:

Received By:_____ Date:_____

[ ] Electronic format (MS Word) of legal description emailed to the City of Idaho Falls

AFFIDAVIT OF CONSENT TO VACATE

STATE OF IDAHO

SS

COUNTY OF

I, _____ _____
Name Address

_____, _____ Being first duly sworn upon
City State Oath, depose and say:

KNOW ALL MEN BY THESE PRESENTS: that the undersigned _____ is a lawful underlying owner and/or adjoining owner and/or benefited user to the parcel of land included within the boundary description described hereon, situated in the City of Idaho Falls, County of Bonneville, State of Idaho, to wit:

SEE ATTACHED EXHIBIT A

I grant my consent to the City to vacate the above-described property and to its disbursement of said property as the City sees fit.

Dated this _____ day of _____, 20_____.

_____
Signature

SUBSCRIBED AND SWORN to before me the day and year first above written.

_____
Notary Public for Idaho

Residing at

_____