

CASE NO. _____

DATE FILED : _____

CITY PLAN COMMISSION
JOLIET, ILLINOIS
PETITION TO VACATE

PETITIONER'S NAME: _____

HOME ADDRESS: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____

CELL # _____ E-MAIL: _____

BUSINESS ADDRESS: _____

CITY, STATE, ZIP: _____

BUSINESS PHONE: _____

LEGAL DESCRIPTION OF PROPERTY: _____

COMMON ADDRESS: _____

PERMANENT INDEX NO. (Tax No.): _____

ROW/EASEMENT SIZE: Width _____ Depth _____ Area _____

PROPOSED USE AFTER VACATION: _____

USES OF SURROUNDING PROPERTIES: North: _____

South: _____

East: _____

West: _____

Attach a list of all adjacent or opposite land owners within 300 feet of property

REASON FOR REQUEST: _____

Is the Property owned by the City of Joliet? YES _____ NO _____

What portion of the right-of-way do you wish to own as a result of the vacation or what portion of the
easement do you wish to vacate? _____

I understand that I will be required to pay for an appraisal of the property requested to be vacated, and that I will be required to purchase it at fair market value established by that appraisal.

STATE OF ILLINOIS) ss
COUNTY OF WILL)

I, _____, depose and say that the foregoing statements are true and correct to the best of my knowledge and belief, I further state that I agree to be present in person or by representation when this petition is heard by the Plan Commission.

Petitioner's Signature

Subscribed and sworn to before me
this _____ day of _____, 20 _____

Notary Public

My Commission Expires: _____

ROW vacations only – The undersigned owners of adjacent property do not object to the vacation of the following described property:

OWNER'S NAME

ADDRESS
