

CITY OF HOLLISTER PETITION FOR STREET VACATION

PO BOX 638
HOLLISTER, MO 65673
417-337-9756
bldgofficial@cityofhollister.com

Date: _____

Adjacent Property Owners:

Name: _____
Mailing Address: _____
City/St/Zip: _____
Phone/Cell: _____
Email: _____

Name: _____
Mailing Address: _____
City/St/Zip: _____
Phone/Cell: _____
Email: _____

Action requested:

We hereby certify we are the property owner(s) and request and petition the City of Hollister for the vacation of the property as described below. The vacated property will harm no person or deprive no person of access. The vacated property shall revert to the owners of the adjacent property.

Site Information:

Location of Property (provide address and general vicinity)

Legal Description of Property and Copy of Plat:

Comments:

Signature of Property Owner(s)

Signature of Property Owner(s)

FOR OFFICE USE:

Filed in the office of the City Clerk (\$50.00 application fee) _____

Submitted to the Planning Commission _____

Planning Commission Recommend _____

Planning Commission Adverse Report _____

Submitted to Council _____

Council vacates by ordinance _____

Concil denies _____