

# WINTER HAVEN

THE CHAIN OF LAKES CITY

## VACATE PUBLIC EASEMENT APPLICATION

PLANNING DIVISION

451 Third Street, NW, Winter Haven, FL 33881

Phone: 863-291-5600 Email: [planning@mywinterhaven.com](mailto:planning@mywinterhaven.com)

### For Official Use Only:

Date Received: \_\_\_\_\_ Received By: \_\_\_\_\_

Fee Received: \_\_\_\_\_ Meeting Date: \_\_\_\_\_

### CONTACT INFORMATION:

Name of Applicant/Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Interest in the Property (e.g. owner, buyer, etc.): \_\_\_\_\_

Name of Agent (if applicable): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### NATURE OF REQUEST:

Identify Easement Affected: \_\_\_\_\_

Legal Description of Easement: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Nature and Purpose of Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### ADDRESS THE FOLLOWING:

1. Are there any known applicable portions of any current city plans for the use of the subject easement? If so, please address this.

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

2. What impacts will the request have on short-range and long-range public and private utilities? Please address if utilities are to be relocated.

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3. What impacts will the request have on short-range and long-range ingress and egress by private and public vehicles? Please address if alternative ingress/egress is proposed.

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4. What is the cost of relocating any public utility lines?

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The City will consider the cost and attendant responsibilities involved in maintaining utilities where improvements may be constructed over existing facilities. The City also ensures that the rights of all franchised utilities are protected.

**SUBMIT THE FOLLOWING:**

1. A letter from the petitioner of his/her agent addressed to the Planning Division requesting the proposal be placed on the City Commission agenda for review purposes.
2. A sign/sealed sketch/description of the easement, or portion thereof, to be vacated.
3. A survey or plat containing a description of all land uses abutting the affected easement.
4. Written request review responses from each franchise utility provider as well as from affected City Departments, including Utilities, Fire, and Police. A list of contact persons and their addresses are attached.
5. Schematic drawing(s) showing the location of all utilities utilizing the subject easement, as provided by each utility provider, i.e., electricity, gas, sewer, water, telephone, drainage, sanitation, or underground TV cable. Applicants may be able to obtain such schematic drawings from the City Public Works Department and other applicable utility providers upon request.
6. Application fee payment.

**CHAPTER 15, SECTION 15-51, CITY POLICY:**

1. No new construction shall occur on or over any existing easements unless the petitioner or his successors and assigns assume and agree to pay all costs of relocating utility drainage lines including legal costs resulting from development of the property.
2. All future costs involved in repairing hard surfaces placed over an easement shall be the responsibility of the petitioner or his successors and assigns.

Ownership Signature

(I) (WE) \_\_\_\_\_ being duly sworn, depose and say that (I) (WE) own one of more of the properties involved in this petition and that (I) (WE) have familiarized (myself) (ourselves) with the rules and regulations with respect to preparing and filing this petition and that the foregoing statements and answers herein contained and other information attached hereto present the arguments in behalf of the petition herein requested to the best of (my) (our) ability and that the statement and information above referred to are in all respects true and correct to the best of (my) (our) knowledge and belief.

SIGNED: \_\_\_\_\_

SIGNED: \_\_\_\_\_

SIGNED: \_\_\_\_\_

SIGNED: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is  personally known to me or  has produced \_\_\_\_\_ as identification and who (did) (did not) take an oath.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

\_\_\_\_\_  
TYPED, PRINTED or STAMPED NAME OF NOTARY PUBLIC

Agent, lessee, or buyer signature

(I) (WE) \_\_\_\_\_

being duly sworn, depose and say that (I) (WE) serve as \_\_\_\_\_ for the  
Agent or Lessee

Owner(s) in making this petition and that the owner(s) (has) (have) authorized (me) (us) to act in this capacity. Further, (I) (WE) depose and say that the statements and answers herein contained and other information attached hereto present the arguments in behalf of the petition herein requested to the best of (my) (our) ability and that the statement and information above referred to are in all respects true and correct to the best of (my) (our) knowledge and belief.

SIGNED: \_\_\_\_\_

SIGNED: \_\_\_\_\_

SIGNED: \_\_\_\_\_

SIGNED: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is  personally known to me or  has produced \_\_\_\_\_ as identification and who (did) (did not) take an oath.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC

\_\_\_\_\_  
TYPED, PRINTED or STAMPED NAME OF NOTARY PUBLIC

## **UTILITY CONTACTS FOR RIGHT-OF-WAY VACATION REQUESTS:**

### **Electric:**

Tampa Electric Company  
2200 E. Sly Avenue COC-Building C  
Tampa, Florida 33610  
813-275-3037

### **Telephone:**

Frontier Communications  
1909 US Hwy 301 N  
Tampa, Florida 33619  
813-740-1231

### **Cable Television:**

Spectrum  
1004 US Highway 92 West  
Auburndale, Florida 33823  
863-288-2340 ext. 84264

### **Natural Gas:**

Central Florida Gas Company  
1705 7<sup>th</sup> Street SW  
Winter Haven, Florida 33880  
863-289-2487

### **Water/Sewer:**

City of Winter Haven Engineering Services Division  
P. O. Box 2277  
Winter Haven, Florida 33883  
863-291-5481

### **Streets:**

City of Winter Haven Streets Department  
P.O. Box 2277  
Winter Haven, Florida 33883  
863-291-5852

### **Fire:**

City of Winter Haven Fire Department  
P.O. Box 2277  
Winter Haven, Florida 33883  
863-291-5677

### **Police:**

City of Winter Haven Police Department  
P.O. Box 2277  
Winter Haven, Florida 33883  
863-291-5874