



CASE #: ROW-_____
FEE AM'T:_____
DATE PAID:_____

Rouss City Hall
15 North Cameron Street
Winchester, VA 22601
540-667-1815
TDD 540-722-0782

CITY OF WINCHESTER, VIRGINIA

RIGHT OF WAY VACATION APPLICATION

Please print or type all information

_____		_____	
		Applicant	
_____	_____	_____	_____
Telephone		Street Address	
_____	_____	_____	_____
E-mail address	City	State	Zip

TYPE OF REQUEST - Please mark type of request and complete information

RIGHT OF WAY VACATION	FEE
_____	<input type="checkbox"/> \$100
(Description of street or alley)	

LOCATION
Nearest Addresses) _____ Zoning _____

REQUIRED MATERIALS LIST

- _____ 1 copy of application (this form completed)
- _____ Letter addressing request, including a statement of the Comprehensive Plan's recommendation
- _____ Fee (check made payable to the **Treasurer, City of Winchester**)
- _____ 1 copy of exhibit demonstrating right-of-way to be vacated
 - exhibit must include 1 photograph and 1 aerial plat or depiction of right-of-way

All materials must be submitted at one time by 5:00 PM on the deadline date for the next regular meeting in order to be placed on the agenda.

Only complete applications, which includes all the above materials, will be accepted.

I/we hereby certify that the above information is complete and that all delinquent Real Estate taxes have been paid per Section 23-9.

SIGNATURE _____ DATE _____
APPLICANT