

**VACATION
APPLICATION**

125 Pine Cone Road North
PO Box 140
SARTELL, MN 56377
PHONE: 320-253-2171
FAX: 320-253-3337



DATE RECEIVED _____

FEE - \$525

=====

APPLICANT _____

PHONE _____ FAX _____ EMAIL _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

FEE OWNER _____

ADDRESS _____ PHONE _____ FAX _____

PROJECT/DEVELOPMENT NAME _____

PROJECT LOCATION _____

VACATION TYPE REQUESTED:

____ PUBLIC STREET/ALLEY

____ EASEMENT - UTILITY

____ EASEMENT - DRAINAGE

LEGAL DESCRIPTION OF PROPERTY (attach a separate document if necessary):

UTILITY AGENCIES

IN PLACE UTILITIES

Qwest: _____
(Signature of Company Representative)

yes _____ no _____

Xcel: (gas) _____
(Signature of Company Representative)

yes _____ no _____

(Electric) _____
(Signature of Company Representative)

yes _____ no _____

Stearns Electric:
(Electric) _____
(Signature of Company Representative)

yes _____ no _____

Charter: _____
(Signature of Company Representative)

yes _____ no _____

Astound: _____
(Signature of Company Representative)

yes _____ no _____

City of Sartell: _____
(Signature of Company Representative)

yes _____ no _____

Justification for Requested Vacation:

This application must be signed by all owners of the subject property or an explanation given why this is not the case.

We, the undersigned, have read and understand the above.

Signature of Applicant

Date

Signature of Owner (s)

Date