



# City of Buhl

## Planning & Zoning Department

### VACATION APPLICATION

#### APPLICANT INFORMATION

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address*

\_\_\_\_\_ *City State ZIP Code*

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

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### REQUEST INFORMATION

The following is a request that the Real Property located at:

\_\_\_\_\_ and LEGALLY DESCRIBED as: \_\_\_\_\_  
*Street Address Parcel #*

be VACATED and the ownership thereof revert as directed by the City Council and according to law.

1. Present use of **all adjoining** property: \_\_\_\_\_
2. Existing Zoning District: \_\_\_\_\_
3. Size of Project Land Area: \_\_\_\_\_
4. Proposed use of property to be vacated: \_\_\_\_\_
5. Inside City Limits:  YES  NO
6. Inside City Area of Impact:  YES  NO
7. \_\_\_\_\_

#### APPLICANT CHECKLIST

**PRIOR TO ACCEPTANCE/SCHEDULING OF THE APPLICATION, THE APPLICANT MUST PROVIDE THE FOLLOWING:**

1. The applicant must prove control of the property for which the request is being made by providing **ONE** of the following:
  - Copy of Warranty Deed, **or**
  - Copy of Earnest Money Agreement or Contract of Sale, duly acknowledged by **BOTH** Buyer and Seller
2. A site map to **SCALE** on an **8 1/2" x 11" paper** of the subject property showing the following:
  - Detailed area map indicating the area requested for variance and adjoining properties;
3. Detailed Written Statements on a Separate Sheet of Paper From The Following:
  - **The Applicant**—the applicant must state the reason for the request and how the vacated property will be used and include an evaluation of the impact of the vacation on all adjacent properties.
  - **Affected Property Owners**—each owner of the sold lots should provide a written statement indicating agreement or disagreement with vacating the proposed right-of-way and/or private easement.
  - **Utility Companies**—must provide a written statement on their letterhead, indicating agreement or disagreement with vacating the public easement.
4. A legal mete and bounds description prepared and stamped by a Professional Land Surveyor for the proposed vacation. **Note:** This is required for the application to be scheduled for a public hearing.



**City of Buhl**  
**Planning & Zoning Department**  
**VACATION APPLICATION**

**UTILITY CONTACTS:**

**Idaho Power Company**

c/o Tracy Morrison  
P.O. Box 70  
1221 West Idaho Street  
Boise, Idaho 83707  
Phone: 208-388-6798

Application for Release of Idaho Power Easement or Release of Subdivision Plat Easement and \$150.00 fee required.

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**Sparklight (aka CableOne)**

CableOne Construction c/o Ron Burns  
P.O. Box 1946  
261 Eastland Drive  
Twin Falls, Idaho 83303  
Phone: 208-733-6877, ext. 7150  
Fax: 208-733-6296

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**Lumen (aka Century Link)**

c/o Brad McNew  
216 South Park Avenue  
Twin Falls, Idaho 83301  
Phone: 208-736-8760  
Fax: 208-736-8755

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**Intermountain Gas Company**

c/o Jim Capps  
451 Alan Drive Jerome, ID 83338  
Phone: 800-548-3679

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**Irrigation Contact:**

**Twin Falls Canal Company**

c/o Jason Brown  
P.O. Box 326  
357 6th Avenue West  
Twin Falls, Idaho 83303  
Phone: 208-733-6731  
Fax: 208-733-1958

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**TDS**

c/o Jessica Kaschmitter  
176 Blue Lakes Blvd. N., Suite 10  
Twin Falls, ID 83301  
Phone: 208-816-9188

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**PMT**

308 Shoshone Street East  
Twin Falls, ID 83301  
PO Box 366  
Rupert, ID 83350  
Phone: 208-933-7151

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**City of Buhl**  
**Planning & Zoning Department**  
**VACATION APPLICATION**

**OFFICIAL USE ONLY**

DATE RECEIVED: \_\_\_\_\_

RECEIVED BY: \_\_\_\_\_

PNZ HEARING DATE: \_\_\_\_\_

APPROVED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
DENIED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>

COUNCIL HEARING DATE: \_\_\_\_\_

APPROVED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>
DENIED:	YES <input type="checkbox"/>	NO <input type="checkbox"/>