

## RIGHT-OF-WAY VACATION APPLICATION

(Complete, accurate and specific information must be entered, including full legal names. Please Print.)

Date: \_\_\_\_\_

Property Owner(s)/Legal Entity: \_\_\_\_\_

Applicant\*: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

\* List legal business owner name, if applicable.

Project/Development Name: \_\_\_\_\_

Project Description: \_\_\_\_\_

Project Location: \_\_\_\_\_ Project Tax Key No(s): \_\_\_\_\_

Existing Zoning: \_\_\_\_\_ 2025 CMP Land Use Identification: \_\_\_\_\_

\*The 2025 CMP Future Land Use Map is available at:

[http://www.franklinwi.gov/DefaultFilePile/User/Planning/2025CMP/2025\\_CMP\\_Ch5\\_2025Future\\_Land\\_Use\\_Map5.7.pdf](http://www.franklinwi.gov/DefaultFilePile/User/Planning/2025CMP/2025_CMP_Ch5_2025Future_Land_Use_Map5.7.pdf)

### All Right-of-Way Vacation submittals must include and be accompanied by the following:

- This Application form accurately completed with original signatures (facsimiles and copies will not be accepted).
- Application Filing Fee: \$125, payable to the City of Franklin.
- Ten copies of a Project Narrative (i.e., a detailed description of the project).
- An electronic copy of the Legal Description for the subject property.
- Ten 8.5 x 11 inch copies of the Legal Description and map showing the right-of-way to be vacated.

- A meeting must be scheduled with the Planning Department prior to Application submittal.
- Upon receipt of a complete submittal, staff review will be conducted within two weeks.
- All Right-of-Way Vacation requests require Plan Commission review and Common Council approval.

The applicant and property owner(s) hereby certify that: (1) all statements and other information submitted as part of this application are true and correct to the best of applicant's and property owner(s)' knowledge; (2) the applicant and property owner(s) has/have read and understand all information in this application; and (3) the applicant and property owner(s) agree that any approvals based on representations made by them in this Application and its submittal, and any subsequently issued building permits or other type of permits, may be revoked without notice if there is a breach of such representation(s) or any condition(s) of approval. By execution of this application, the property owner(s) authorize the City of Franklin and/or its agents to enter upon the subject property(ies) between the hours of 7:00 a.m. and 7:00 p.m. daily for the purpose of inspection while the application is under review. The property owner(s) grant this authorization even if the property has been posted against trespassing pursuant to Wis. Stat. §943.13.

(The applicant's signature must be from a Managing Member if the business is an LLC, or from the President or Vice President if the business is a corporation. A signed applicant's authorization letter may be provided in lieu of the applicant's signature below, and a signed property owner's authorization letter may be provided in lieu of the property owner's signature[s] below. If more than one, all of the owners of the property must sign this Application).

Signature of Property Owner: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Date: \_\_\_\_\_

Date: \_\_\_\_\_

Signature of Property Owner: \_\_\_\_\_

Name and Title: \_\_\_\_\_

Date: \_\_\_\_\_