REQUEST TO VACATE EASEMENT OR RIGHT OF WAY

To: Vice President of Operations	s, Huntsville Uti	lities		
Person Making Request:				
Company:				
Address:				
City & Zip:				
Phone: (W)	(H)			
Location of Property: Lot	Block	Plat Book	Page	
Subdivisio	n:			
Street Add	ress:			
Is the area located in the city lim	nits of Huntsville	e? Yes N	0:	
If area is not located in Huntsvill	le, we will send	to the appropriate Cit	ty or County government.	
Reason for Vacating:				
() Existing encroachment () Planned encro	achment () Comb	oining lots () Other	
 Please attach (5) copies of Please show encroachmen Highlight the area(s) you w 	it dimensions, No	rth arrow, and be as sp	ecific as possible.	
The City or County agency, not Hur Way. Huntsville Utilities will detern Electric, Gas, or Water Department County agency on your behalf or yo	mine if this easer ts and will forwar	ment or Right-of-Way is d by mail that informat	needed by Huntsville Utilities	
**Preference:	Mail	Pi	ckup	
**Will be mailed if neither is marke	ed			
Signature of Person Making Request		Date	Date	