



# Town of Dundee

• 135 Main Street • PO Box 1000 • Dundee, Florida 33838 • (863) 419-3100 • Fax (863) 419-3105

## Petition for Vacating a Plat

### Applicant

The following information is required for submission of a Petition for Vacating a Plat or a right-of-way within the Town limits of Dundee, Florida. **Please print or type the required information below.**

Name of Property Owner: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Name of Representative, if applicable: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Reason for Request: \_\_\_\_\_

### Property Identification

Property Address or General Location: \_\_\_\_\_

Present Use of the Property: \_\_\_\_\_

Existing Structures Located on the Site: \_\_\_\_\_

Total Acreage: \_\_\_\_\_ Number of Residents on Site: \_\_\_\_\_

Assessed Property Value: \_\_\_\_\_ Taxable Value: \_\_\_\_\_

Legal Description of the Property: \_\_\_\_\_

Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Subdivision: \_\_\_\_\_

Parcel I.D.#: \_\_\_\_\_

### Required Elements of the Petition (attach as appropriate)

Proof of Publication of Notice of Intent: \_\_\_\_\_

Certificate of Title: \_\_\_\_\_

Statement of Taxes and Resolution: \_\_\_\_\_

**Note:** Unless specific land use and zoning designations are requested, the City will assign designations, which most closely conform with the actual use of the property or with designations of surrounding properties. An application fee will be assessed only on requests for land use and zoning changes which result in an increase in land use or zoning intensity over that allowed under the County designations. (You will need to fill out separate application for land use/zoning requests.)

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

Received By: \_\_\_\_\_

Fee Paid: \_\_\_\_\_

File Number: \_\_\_\_\_

**OWNER'S SIGNATURE PAGE**

(I) (We), \_\_\_\_\_ being duly sworn, depose and say that (I) (we) own one or more of the properties involved in this petition and that (I) (we) authorize the Town of Dundee to process this petition for the vacating of a plat or a portion thereof that lies within the Town, in accordance with all adopted Town rules and regulations, and in conformance with State law.

Further (I) (we) or any agent or lessee of the subject property authorized by (me) (us) to file this petition, deposes and say that the statements and answers contained in the application and any information attached thereto, present the arguments in behalf of this petition to the best of (my) (our) ability; and that the statements and information referred to above are in all respects true and correct to the best of (my) (our) knowledge and belief.

**OWNERS**

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Printed Name of Owner

STATE OF FLORIDA  
COUNTY OF POLK

**OWNER'S NOTARIZATION**

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced a driver's license as identification and who did not take an oath.

\_\_\_\_\_  
Notary Public  
Notarial Seal and Commission  
Expiration Date

**AGENT, LESSEE, OR BUYER'S SIGNATURE PAGE**

(I) (We), \_\_\_\_\_ being duly sworn, depose and say that (I) (we) serve as \_\_\_\_\_ (agent or lessee) for the owner(s) in making this petition and that the owner(s) (has) (have) authorized (me) (us) to act in this capacity.

Further, (I) (we) depose and say that the statements and answers herein contained and other information attached hereto present the arguments in behalf of the petition herein requested to the best of (my) (our) ability and that the statements and information above referred to are in all respects true and correct to the best of (my) (our) knowledge and belief.

**AGENT, LESSEE, OR BUYER(S)**

\_\_\_\_\_  
Signature of Agent, Lessee, or Buyer(s)

\_\_\_\_\_  
Printed Name of Agent, Lessee, or Buyer(s)

\_\_\_\_\_  
Signature of Agent, Lessee, or Buyer(s)

\_\_\_\_\_  
Printed Name of Agent, Lessee, or Buyer(s)

\_\_\_\_\_  
Signature of Agent, Lessee, or Buyer(s)

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Printed Name of Agent, Lessee, or Buyer(s)

\_\_\_\_\_  
Signature of Agent, Lessee, or Buyer(s)

\_\_\_\_\_  
Printed Name of Agent, Lessee, or Buyer(s)

STATE OF FLORIDA

**AGENT, LESSEE, OR BUYER(S) NOTARIZATION**

COUNTY OF POLK

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Notary Public  
Notarial Seal and Commission  
Expiration Date