

APPLICATION FOR ENCROACHMENT/SALE OF CITY PROPERTY/ RELINQUISHMENT OF CITY EASEMENT

City of Traverse City, 400 Boardman Avenue, Traverse City, MI 49684 (231) 922-4460 Fax (231) 922-4457

Applicant Name:		Phone:		
Applicant Email:				
Address:				
Street	City	State	Zip	
Property Owner Name:		Phone:		
Authorized Signatory of Property Owner:		Title:	Title:	
Type of request (please check of	one): Encroachment			
	☐ Sale of City Prope	rty		
	□ Relinquishment o	f City Easement		
Description/location/nature of	request:			
	•			
Applicant Signature:		Date	Date:	
The following are required in o	rder to be considered for	this request:		
Letter describing	your request addressed t	o the City Engineer.		
the request.	by a Licensed Surveyor do	etailing the nature an	d the extent of	
Legal description	of proposed encroachme	ent/city property/city	easement.	
Certification that collected by the	property owner is not de City.	linquent in paying ar	y debt owed to or	
	(Office Use Only	<i>(</i>)		
Non-refundable \$475.00 Applic	ation Fee received on:			
Staff review by Engineering, Cle Water/Sewer Maintenance, Ma	·	•	Power, Streets,	
Approval of Permission by City	Commission on:			