

Easement / Street/ Alley Abandonment

Application Form

Please fill out this form completely, supplying all necessary information and documentation to support your request. Your application will not be placed on the City Council agenda until the application is completed and required information provided.

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. ME		deed or current survey of prope	erty.	1 9 4	☐ Cros	s Access Eas	sement
	Name	William D. COH	RAD	Phone	870-69	2-4340	Select if this is the primary conta
Owner	Address	5726 BOWDEN I	DRIVE	Fax			
	City, State, Zip	JONESBORD, AR 7	2404	E-mail			
t/ ative	Name	MICHAEL P. MCN	EESF.	Phone	870-565	65/22	Select if this is the primary contact
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oresentativ	Address	3008 NEWLASTL	e Drive	Fax			
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