ALACHUA COUNTY, FLORIDA

Application to Vacate Plat or a Portion Thereof (Pursuant to Unified Land Development Code, Chapter 402.63, Article 12)

Please Print or Type	
Name(8): DAVID W OWEN James Address: 1730 S.E. 245th STREET	W.Owen
City: HAWTHORNE State	FL Zip Code 32640
Tolombana N. Marama Harris Managari	ALL: TreefarmParkeamail.com
	e written request to vacate that certain plat, or portion
AS PER ATTACHED SURVEY, VACATE A	LL VIRTUAL AND UN-USED LOTS, ROADS,
SURVEY MARKS, SURVEY LINES AND AN	14 OTHER VIRTUAL MARKS DISPLAYED
IN THE N.W. CORNER OF DAVID WC	DUSEN'S PART OF PROPERTIES; ACCOUNT
NUMBERS 19153 000 000 AND 19150	OOL OOD, SEE ITEM 1 BELOW.
Section 12 , Township 10 South, Range 25	
Application must include signatures of respective of trustees, corporate officer, official or agent. Proof of own of the respective owners.	wners, e.g., husband and wife, partners, co-owners, nership, survey, and title work shall be the responsibility
Please attach the following to the completed application X Title work X Surveys/Tax Maps Proof of Ownership Current Ad Valorem Tax Receipt Resolution from municipality (If applicable)	1. ALL VIRTUAL ROADS LOOP-AROUND AND DO MOT PROVIDE EGRES OR ACCESS TO ANY ROAD, PRIVATE OR COUNTY OR STATE MAINTAIN ROADS.
The undersigned certify that I/we own fee simple title to with I/we request to be vacated. I/We also certify that the best of our knowledge and belief.	o the whole or that part, of the tract covered by the plat ne information supplied herein is true and correct to the
Applicant's Signature Much Dwen	Corporate Officer
Print Name DAVID W OWEN	Print Name/Title
Applicant's Signature	
NO OTHER APPLICANT	Attest:
Print Name	Print Name/Title
N/A	
Applicant's Signature	(Corporate Seal)
NO OTHER APPLICANT	1
Print Name	
N/^	

