



BROKEN ARROW

Where opportunity lives

APPLICATION FOR DEDICATIONS

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APPLICATION IS HEREBY MADE TO THE CITY OF BROKEN ARROW TO CONSIDER ONE OF THE FOLLOWING:

DEDICATION OF: EASEMENT: X RIGHT OF WAY: _____ OR OTHER: _____

Property Location: Tucson Street & S. 23rd Street

Legal Description: Unplatted

Parcel number: 97401-74-01-00010
Subdivision _____ Lot _____ Block _____

Plat name* (if applicable): Unplatted - See attached

***If unplatted: Attach legal description**

Project Details (Include-purpose of project, why the request, new proposal, etc.):
20' Utility Easement for proposed Tucson Village Subdivision (PUD 234)

Applicant (Name & Company): AAB Engineering, LLC

Address: PO Box 2136

City: Sand Springs State: Oklahoma Zip: 74063

Phone: 918-514-4283 Fax: 918-514-4288

Email: jarrod@aabeng.com

Property Owner(s) of Record: Tucson Village, LLC

Address: 1420 West Kenosha

City: Broken Arrow State: Oklahoma Zip: 74012

Phone: 918-258-6161 Fax: 918-258-4466

Email: _____

SIGNATURE OF APPLICANT: [Signature] DATE: 5-5-17

(TYPE OR PRINT NAME OF APPLICANT SIGNING): Jarrod Sanders

CHECK BOX IF ATTACHING OWNER'S SIGNATURE AUTHORIZATION FORM

SIGNATURE OF PROPERTY OWNER(S): [Signature] DATE: 5-4-17

(PRINT NAME OF OWNER(S) SIGNING): Glenn Shaw



APPLICATION FOR DEDICATIONS

GUIDELINES FOR SUBMITTAL OF APPLICATION FOR DEDICATION OF AN EASEMENT(S), RIGHT-OF-WAY(S) OTHER

Confirm the following was submitted with application, incomplete applications will not be processed:

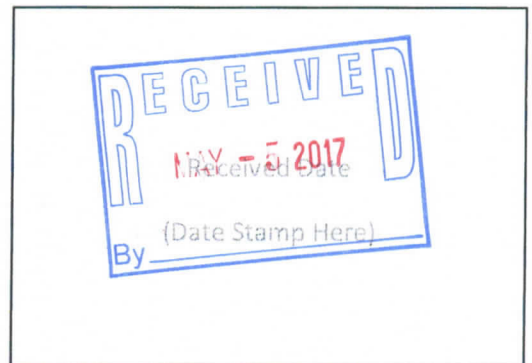
- Parcel number (required-obtain from County Tax Bill)
- Detailed description of reason for request (PDF or hard copy and word doc./email)
- Original Legal documents signed and executed by all relevant parties (templates available upon request)
- Survey depicting the entire property
- Location Map using Broken Arrow Street names
- Legal description AND address of the subject property
- Email all PDF's AND required word doc's as requested per application (mhilton@brokenarrowok.gov)
- Fee: Per Manual of Fees, there are currently no fees for dedications by separate instrument

CITY STAFF TO COMPLETE THIS SECTION

REC'D BY: FEE: RECEIPT NO. :

PROJECT NAME (IF APPLICABLE):

CITY COUNCIL DATE:



NOTES: