



# ***BENTON COUNTY PLANNING DEPARTMENT***

## **HANDOUT FOR SUBDIVISION VACATION APPLICATION**

This packet is designed to assist you in preparing your application for a Subdivision Vacation Application. Application(s) may be submitted in person to the Benton County Planning Department, 1002 Dudley Avenue or the Benton County Building Department, 5600 W. Canal Place, Kennewick, WA 99336 between the hours of 8 a.m. and noon and 1 p.m. and 5 p.m., Monday thru Friday or they may be mailed to PO Box 910 Prosser, WA 99350.

Please provide the following information at the time of submittal. If any of the following information is not available we may not be able to process your application.

- 1. A completed application form and applicable non-refundable fee of \$500.00.** Both pages of the application form must be submitted. **ALL persons with an ownership interest in the property on which the land use action is proposed must sign the application indicating approval other than interests exclusively limited to ownership of the parcel's mineral rights.**
- 2. One full sized copy and one 11 x17 or smaller copy of the subdivision showing the proposed vacation(s).** The following information shall be included on the plat map:
  - a. All information on the existing recorded subdivision.
  - b. Proposed vacation(s) clearly identified and shown on the plat.
  - c. The map scale shall be at the same scale as the existing plat or platsThe above information can be drafted upon a copy of the existing plat.
- 3. If the Subdivision is subject to restrictive covenants which were filed at the time of the approval of the subdivision and the application for vacation would result in the violation of a covenant, the application shall contain a written agreement signed by all parties subject to the covenants agreeing to terminate or alter the relative covenants to accomplish the purpose of the vacation.**

**NOTE: THE APPLICATION FEE IS NON-REFUNDABLE. THERE ARE NO GUARANTEES THAT YOUR APPLICATION WILL BE APPROVED.**

**Any information submitted to the Benton County Planning Department is subject to public records disclosure law for the State of Washington (RCW Chapter 42.17) and all other applicable law that may require the release of the documents to the public.**

If the Planning Department determines that all of the criteria for a Subdivision Vacation Application have been met a file will be setup and the application routed to appropriate reviewing agencies. Each agency will review your application and provide the Planning Department with their comments. Written notification of the public hearing before the Board of County Commissioners will be sent to property owners within 300 feet of the parcel, the applicant, and/or legal owner.

**BENTON COUNTY  
SUBDIVISION VACATION APPLICATION**

FILE NO. \_\_\_\_\_

For Official Use Only
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1. Name of Subdivision being vacated \_\_\_\_\_
2. Name and address of applicant \_\_\_\_\_  
\_\_\_\_\_  
Telephone \_\_\_\_\_  
  
If you wish to be contacted via email please list your email address: \_\_\_\_\_  
\_\_\_\_\_
3. Parcel number and Legal description of subdivision or portion thereof, to be vacated:  
\_\_\_\_\_
4. Explain the reason the vacation is being requested: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
5. Other comments or pertinent Information: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Signatures, printed names, and addresses of all legal owners affected by this vacation must be attached to this application. **See Page Number 3.**

**ALL persons with an ownership interest in the property on which the land use action is proposed must sign the application other than interests exclusively limited to ownership of the parcel's mineral rights.**

I certify that the information given in this application is true and complete to the best of my knowledge.

**Signature Block for individuals only.**

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Legal Owners

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Person with additional  
ownership interest

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

**If the applicant or legal owner is a corporation / partnership / LLC etc. please use the following signature block. Please copy this page if there is more than one corporation / partnership / LLC signature required.**

Applicant/Legal Owner: \_\_\_\_\_

By: \_\_\_\_\_,  
(print name) (Title)

Signature: \_\_\_\_\_,  
(Signature) (Title)

The above signed officer of \_\_\_\_\_ (name of entity) warrants and represents that all necessary legal and corporate actions have been duly undertaken to permit \_\_\_\_\_ to submit this application and that the above signed officer has been duly authorized and instructed to execute this application.

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**FEE: \$500.00 to be submitted with the application. Checks are to be made payable to the Benton County Treasurer. THIS FEE IS NON-REFUNDABLE. THE RECORDING FEE IS TO BE PAID AT THE TIME OF RECORDING**

**FOR OFFICIAL USE ONLY:**  
Critical Area Review Completed by \_\_\_\_\_ on \_\_\_\_\_.  
Application approved for processing by \_\_\_\_\_ on \_\_\_\_\_.  
Zoning \_\_\_\_\_ Comp Plan Designation \_\_\_\_\_

