

VACATION OF RIGHT-OF-WAY APPLICATION

- 1. NAME OF STEET(S): SE Main Street
- 2. LOCATION OF PROPOSED VACATION: NE Corner of SE 2nd Street and SE Main Street

3. LEGAL DESCRIPTION (attach if description is metes and bounds description):

See Attached

4.	APPLICANT Cityscap	e Residential	PHONE	(913) 216-0124
	CONTACT PERSON <u>Ryan Adams</u> ADDRESS 10000 College Boulevard, Suite 120		FAX	Overland Park, KS 66210
		IL radams@cityscaperesidential.com		
5.	PROPERTY OWNER D	TLS Apartments, LLC	PHONE	(913) 216-0124
	CONTACT PERSON J	ames Thomas, Jr.	FAX	

ADDRESS 8335 Keystone Crossing, Suite 220 CITY/STATE/ZIP Indianapolis, IN 46240 E-MAIL jthomas@cityscaperesidential.com

6. ENGINEER/SURVEYOR <u>Phelps Engineering, Inc.</u> PHONE (913) 393-1155 CONTACT PERSON <u>Doug Ubben, Jr.</u> FAX (913) 393-1166 ADDRESS <u>1270 N. Winchster</u> CITY/STATE/ZIP <u>Olathe, KS 66061</u> E-MAIL <u>dougubben@phelpsengineering.com</u>
7. OTHER CONTACTS <u>PHONE</u>

CONTACT PERSON _____ FAX _____ ADDRESS _____ CITY/STATE/ZIP _____ E-MAIL

All applications require the signature of the owner on the application and on the ownership affidavit. Applications without the proper signatures will be deemed incomplete and will not be processed.

IS APARTMENTS, LUC MANAGEROF AS MANASFR MUNAGER PROPERTY OWNER AMES E. THOMAS .. Print name Date Filed: _____ Processed by: ___ Receipt #: Application #

revised August 2019



OWNERSHIP AFFIDAVIT

and acknowledges the submission of the application for subdivision of said property under the City of Lee's Summit Unified Development Ordinance.

2020 Dated this _____ day of _____

Signature of Own her Ree ED manager of

Printed Name

Subscribed and sworn to before me this ______ day of MAR_, 20_20___

Miliese L Brown

Notary Public

11-18-21

Melissa L. Brown Notary Public Seal Hamiliton County, State of Indiana My Commission Expires November 18, 2021 Commission No 649138

My Commission Expires

REVISED APRIL 2019