

Department of Planning Services

Roadway Easement Application

Name of road that proposed easement accesses _____

Township _____ Township Section _____

Applicant

Applicant _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____ E-mail _____

**Property
Ownership**

Property Owner _____

Address _____

City _____ State _____ Zip _____

Telephone _____ Fax _____ E-mail _____

**Filing
Requirements**

Applications will not be accepted unless the following filing requirements are submitted with this application

- Applicable filing fees (check payable to the Allen County Treasurer)
- Dedication of Roadway Easement Document, signed and notarized
- Legal description and survey of real estate
- Legal description and survey of proposed easement

I certify the accuracy of all information provided with this application, including surveys, legal descriptions, and dimension of proposed easements and real estate.

(printed name of applicant)

(signature of applicant)

(date)

APPROVAL FROM DEPT. of HEALTH, HIGHWAY DEPT., AND SURVEYORS OFFICE IS REQUIRED PRIOR TO DPS APPROVAL

Fort Wayne-Allen County Department of Health

Approved Not Approved Reviewed by _____ Date _____

Allen County Highway Department

Approved Not Approved Reviewed by _____ Date _____

Allen County Surveyors Office

Approved Not Approved Reviewed by _____ Date _____

Received	Receipt
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