## **Consent for Vacation**

## Affected Property Owner

Name:				
Address:				
Street		City	State	Zip
Telephone:				
Signature:				
Date:				
State of	)			
County of	) ss.			
Personally appeare and acknowledged the fore		t to be their voluntary act and de		_
		Before me:		_
		Notary Public for:		
		My Commission Expires: _		
Tax Map No.		Tax Lot No		