



Cardston County
Application
Close or Cancel a Road



Name of individual requesting Closure: _____

Address: _____

Phone Number: _____

Application Fee \$100.00 Paid:

Yes

☐

Method

No:

☐

Road allowance requesting to be closed:

indicate the road allowance by marking the location below, provide legal locations.

Quarter

Quarter

If the road allowance is closed
What quarter would you like it
amalgamated in to?

Quarter

Quarter

Provide the reason you are requesting a road closure:

Disclaimer: Cardston County will place a Utility Easement across or along the road allowance before the road is closed and transferred. Council may place other conditions if they deem them to be necessary. **The application fee is \$100.00. The applicant will be responsible for all cost associated with the road closure. The price determined for the sale of the land is based on the Municipal Reserve Price as set by Council, any diversion from the set price is at Council discretion.**

Council Decision:

Date:

Admin:

Bylaw Created: Yes

☐

Bylaw Number:

No

☐

Map attached: Yes

☐

Estimated cost:

Municipal Reserve Price \$