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A copy of the Applicant's deed to the property fronting and adjacent to the application area. 2. A copy of the Commonwealth's deed to the right of way requested. 3. A typed bearing and distance legal description of the application area to be submitted in both hardcopy and electronic Word format. 4. Two (2) stamped/signed copies of a land surveyor's plat, 8 ½ " x 14" in size, showing the application area along with the applicant's adjacent property lines to establish that the applicant is the fronting adjacent property owner. The plat is to meet the minimum standards as per the attached sample plat and requirements. All survey work shall be staked in the field. 5. Sufficient color photographs to show the entire application area. Transportation Cabinet personnel will use these photographs to establish the condition of the application area at the time of your application to purchase state right of way, should you make improvements to the application area by means of an approved encroachment permit prior to preparation of an appraisal report. 6. Two (2) sets of highway plan and profile sheets with the application area marked in yellow. 7. A copy of your application for an encroachment permit if application has been made, and a copy of any approved permit issued as a result of your application. 8. Two (2) sets of site plans, if development on the application area and/or the adjacent property will effect or alter the present topography, drainage or access points. The site plan may be substituted by submitting Transportation Cabinet Form TC 99-1(A), *Application for Encroachment Permit*, to begin the application process. (An approved permit may be required before property will be declared surplus.) 9. Three (3) hard copies and one (1) PDF of an appraisal report prepared by an appraiser that has been prequalified by the Transportation Cabinet. **DO NOT** have the appraisal prepared until the Cabinet tentatively approves your request to purchase state right of way. The appraisal is to establish the contributory and entity value of the application area. The appraisal report must be accompanied by an Appraisal Summary Sheet approved by the KYTC Appraisal Branch Manager. 10. The application area will be appraised as to its entity value and its contributory value to the adjacent property, as outlined in the Cabinet's *Right of Way Guidance Manual*. You will be required to pay the higher of the two values.      1. Should you make any improvement to the application area prior to the date of the application, then these improvements will be reflected into the appraisal report. 2. Improvements made to the application area by means of an approved permit after the approval date of the permit, but prior to the appraisal report, will not be taken into consideration in establishing the appraised value. For appraisal purposes, the condition of the application area shall be established by the photographs cited in Item D of these instructions along with information contained in an approved encroachment permit. 3. All applications to purchase state right of way must be reviewed and approved by the District Office, Central Office, and may require the Federal Highway Administration or the Turnpike Authority of Kentucky, if applicable. 4. All sales of state-owned right of way are subject to approval of the Secretary of the Finance and Administration Cabinet and the Governor, pursuant to KRS 45A. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | I have read and understand the instructions. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **APPLICANT SIGNATURE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **DATE** | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |  | | | | | | | | | | | | | | | |  |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  | |  |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  |  | |  | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |  | | |

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| **SECTION 1: APPLICANT INFORMATION***(To be provided by applicant)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NAME** | | | | | | | | | | | **EMAIL** | | | | | | | | | | | | | | | **PHONE** | | | | | | | | | |
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| **ADDRESS** | | | | | | | | | | | | | | | | | | | **CITY** | | | | | | | **STATE** | | | | | **ZIP** | | | | |
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| **BUSINESS STATUS** | | | | | | | **MARITAL STATUS** | | | | | | If married, will survivorship clause be on deed? | | | | | | | | | | | | | | | |  | | YES | |  | | NO |
|  | | | | | | |  |  | M |  |  | S |
| **LEGAL ENTITY** | | | | | | *If the applicant is a legal entity, provide the name and title of the authorized signatory.* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | YES |  | NO | **AUTHORIZED SIGNATORY** | | | | | | | | | | | | | | | **TITLE** | | | | | | | | | | | | | | |
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| **LOCATION OF THE PROPERTY DESIRED** | | | | | | | | | | | | | **INTENDED USE OF PROPERTY** | | | | | | | | | | | | | | | | | | | | | | |
| *(Provide address, mile point, or long./lat.)* | | | | | | | | | | | | |  |  | | Commercial | | | | | |  | | Industrial |  | | Residential | | | | | | | | |
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|  | | Agricultural | | | | | |  | | Other *(specify)*: | | | | | | | | | | | |
| 1. | | I certify I am the fronting adjacent property owner to the property herein requested; and, | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | YES | |  | | NO | |
| I acquired title to the adjacent property by deed dated | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | YES | |  | | NO | |
| recorded in Deed Book       Page      . | | | | | | | | | | | | | | | | | | | | | | | | |  |
| 2. | | I have applied for or I intend to apply for an encroachment permit. | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | YES | |  | | NO | |
| 3. | | I intend to begin work prior to completion of the appraisal. | | | | | | | | | | | | | | | | | | | | | | | | |  |  | | YES | |  | | NO | |
| **ATTACHMENTS** *(To be provided by applicant)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | Copy of the deed referenced in question 1 above | | | | | | | | | | | |  |  |  |  | | Sufficient color photos to show the entire application area | | | | | | | | | | | | | | | |
|  |  | | Copy of the Commonwealth’s deed to the right of way being requested | | | | | | | | | | | |  |  |  |  | | Copy of the permit application referenced in question 2 above *(Required only if YES is checked.)* | | | | | | | | | | | | | | | |
|  |  | | Typed legal description of the application area submitted in hard copy & electronic Word format | | | | | | | | | | | |  |  |  |  | | Two (2) sets of site plans depicting the application area and/or the adjacent property on which development will affect or alter the present topography by drainage or access points. | | | | | | | | | | | | | | | |
|  |  | | Two (2) stamped and signed copies of a land surveyor’s plate, 8½” x 14” in size, showing application area and applicant’s property lines *(All surveying work must be staked in the field.)* Survey plat and Legal Description must reference KYTC Stations and offsets. | | | | | | | | | | | |  |  |  |  | | Two (2) sets of plan and profile sheets with the application area marked in Yellow. | | | | | | | | | | | | | | | |
| **AGREEMENT AND SIGNATURE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | I understand and agree that the required appraisal of the requested property will be prepared at my expense by an appraiser that has been prequalified by the Transportation Cabinet, and I hereby release the contents of any appraisal to the Transportation Cabinet for review, and also allow direct contact between the appraiser and the Cabinet requiring the contents and conclusions of the appraisal. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | I further agree and understand that all my right of way markers and right of way fencing will be replaced or relocated at my expense. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  |  | | I have read and accept all the requirements and conditions herein as my part of my application to purchase state-owned right of way and agree that I am bound by the same. I am not relying on any statements, verbal or otherwise, not contained herein. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **APPLICANT SIGNATURE** | | | | | | | | | | | | | | | | | | | | | | | **DATE** | | | | | | | | | | | | |
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| |  |  |  |  | | --- | --- | --- | --- | | **SECTION 2: PROJECT IDENTIFICATION** *(To be completed by District Property Management Agent)* | | | | | **INSTRUCTIONS:** Review application and attachments. Complete form TC 62-222, *District Checklist for Surplus Property Disposal.* Prior to valuation authorization, forward the completed application packet to Central Office for review. | | | | | **COUNTY** | **ITEM NO.** | **PARCEL** | **NAME** | |  |  |  |  | | **PROJECT NO.** | **FEDERAL NUMBER** | | **PROJECT** | |  |  | |  | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ROAD** | | | | | | | | | | | | | | | | | | | | | | | **MILE POINT** | | | | | | | | **ACCESS CONTROL** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **SECTION 3: ACQUISITION INFORMATION & APPROVAL** *(To be completed by District Right of Way Section)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **NOTE:** All information must be provided OR marked as not applicable. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **ACQUISITION COST** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **DEED BOOK** | | | | | | | | | | | **PAGE** | | | | | | | **DATE** | | | | | | | | | | |
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| **REASON ACQUIRED:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **REASON NO LONGER REQUIRED:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| **APPROVAL SIGNATURE** *(Chief District Engineer)* | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | **DATE** | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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| **NOTES:** | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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