



# Application for Reimbursement of Public Improvements

447 East Main, Vernal, Utah 84078  
www.vernalcity.org

Phone (435) 789-2255  
FAX (435) 789-2256

**INCLUDE THE FOLLOWING ATTACHMENTS:**

- Legal description of the parcel(s) that may utilize or benefit from the privately installed public improvement(s).
- Engineers estimate of the public improvement(s) cost or an affidavit showing the public improvement(s) actual cost.
- Description of public improvement(s).

**ENTITY WHO PAID ORIGINAL COSTS FOR IMPROVEMENT(S)**

Name:

Address:

Phone:

FAX or email:

**APPLICANT**

Name:

Address:

Phone:

FAX or email:

I certify that this information, including any attachments, is correct to the best of my knowledge.

Applicant:

Date:

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_, known to me to be the person whose name is subscribed to the foregoing instrument, and upon his/her oath acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Signature: \_\_\_\_\_

Notary Public in and for the State of Utah

(seal)

this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_

Commission expires on: \_\_\_\_\_

**NOTICE**

Notice is hereby given to all persons having an interest in the real property described herein, that pursuant to Vernal City Ordinance Section 16.58.205, any persons developing the land described herein or constructing any improvements thereon are subject to an obligation to make reimbursement for a pro rata share of privately funded public improvements and may not utilize privately funded improvements for the described real property without receiving clearance from Vernal City that the pro rata share of privately funded public improvements obligation has been satisfied.

City Manager:

Attest:

**FOR OFFICE USE ONLY**

Application Number \_\_\_\_\_ Date \_\_\_\_\_ By \_\_\_\_\_

Required Fee \_\_\_\_\_ Paid  Cross Reference \_\_\_\_\_