

**APPLICATION
ROAD OPENING REQUEST**

DATE _____

Dear Sir:

Please consider opening of the dedicated County Road right-of-way described as follows:

1. Name of right-of-way (or road) _____

2. Nearest town _____

3. Name of subdivision _____

a) Survey of league _____

b) Recorded: volume _____ page _____

4. Width of dedicated right-of-way _____

a) Length of road requested opened _____

b) Date of right-of-way recorded _____

5. Is drainage ditch crossing required? yes _____ no _____

a) Number of ditches _____ Briefly described _____

6. Number of units to be served:

a) Number existing _____ Number proposed _____

b) Time schedules of proposed construction _____

7. Type construction:

a) Permanent structure: yes _____ no _____

 Check one: residence _____ business _____ other _____

b) Portable building (mobile home) _____

8. County building permit: yes _____ no _____

 If yes, give permit number and date _____

9. Do you have access to property by opened public road?

Yes _____ No _____ If yes, briefly describe: _____

10. Person requesting road opening

a) Name _____

b) Address _____

c) Town/State/Zip _____ Phone _____

11. Legal description of all property owned on right-of-way: _____

(ATTACH COPY OF THE RECORDED DEED)

12. Name and address of person property purchased from: _____

13. Name and address of agent or representative who handled sale of property to you: _____

14. **Attach copy of current year's tax receipts for all property owned in Galveston County.**

15. **Attach plot or map showing location of road to be opened. (RECENT SURVEY)**

Signed: _____

REMARKS: _____
