



CITY OF TOMBALL

RIGHT-OF-WAY ABANDONMENT REQUEST APPLICATION

Please provide the following information & return your submittal to the City Manager's Office,
401 Market St., Tomball, Texas 77375.

Minimum Submittal Requirements

- \$1,000 application fee;
- Detailed description of entire limits or extent of the ROW and the limits to be abandoned, if different;
- Five (5) copies of the Boundary Survey and metes & bounds description of the ROW to be abandoned;
- Electronic File (PDF) of Boundary Survey and metes & bounds description of the ROW to be abandoned;
- Copy of letters to utility providers, drainage districts, and/or other interested agencies stating they have been notified of the requested ROW abandonment;
- Letter of "No Objection" from each of the concerned entities; and
- Completed and signed application form.

Applicant Information

Name HOLDERRIETH CAMPUS PROPERTY MANAGEMENT, LLC

Mailing Address 10402 CREEKBEND SHORE DRIVE

City CYRPES State TX Zip Code 77433

Phone Number 281 - 351 - 4911 Fax Number _____

E-mail Address houstonheartcenter@yahoo.com

Agent or Engineer Information

Name CIVIL SYSTEMS ENGINEERING, INC.

Mailing Address 1202 LAKE POINTE PARKWAY

City SUGARLAND State TX Zip Code 77478

Phone Number 832 - 444 - 5918 Fax Number _____

E-mail Address khertrand@cseengineers.com

We, the undersigned property owners of
**NORTHWEST HOUSTON HEART CENTER, LOT 1 IN BLOCK 1 AND
MAIN STREET ADDITION LOTS 1, 2, 11 AND 12 IN BLOCK 6**

(name of subdivision, lot, and block number)

do hereby request that the City of Tomball release and vacate the said Right-of-Way as further described
in the attached Boundary Survey.

Adjacent Property Owners Signatures

(please include your name, mailing address, HCAD number of your property, and signature)

1. **DAVID R & MARGARET L BURKE / 305 LAWRENCE STREET, TOMBALL, TX 77375 / HCAD 0670990060009**
2. *David R. Burke / Margaret L. Burke*
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

Certification

I, **DR. ADNAN ASLAM**, being one of the above named persons, do hereby
certify that the above named persons include all abutting property owners of the property being vacated
and released.

Please list the reasons for the request and how this request will benefit the public:

**THE ALLEY ABANDONMENT WILL FACILITATE THE FUTURE EXPANSION OF THE NWHHC MEDICAL OFFICE
AND COMPLIANCE WITH CITY ORDINANCES AND STANDARDS. THE ABANDONMENT WILL POSE NO
ADVERSE IMPACT TO EXISTING CITY FACILITIES OR PRIVATE UTILITIES.**

(Signature)

[Handwritten Signature]
12/22/23

(Printed Name)

**AHMAD ADNAN ASLAM
DR. ADNAN ASLAM**