

Annexation/Zoning Application

Owner Information	Applicant In	nformation
Owner Name	Applicant Name	
Address	Address	
City	City	
State/ Province Zip/ Postal Code	State/ Province	ZIP/ Postal Code
Phone Number	Phone Number	
Fax Number	Fax Number	
Email	Email	
Address of parcel to be considered		
Parcel No.	No. of Acres	
Reason for Hearing		
Applicants Signature		Date
Owners Signature		Fee Charged
Date of Hearing	Received By	Cash/Check No.