

CITY OF RAWLINS
ANNEXATION APPLICATION FORM
APPLICANT OR AGENT MUST ATTEND SCHEDULED MEETINGS

Name of Annexation and or Subdivision:								
Owner:				Telephone:				
Owner's Address:								
E-mail Address:								
(If several property owners, names and addresses of all must be given: attach separate sheet if necessary.)								
Applicant/Agent:					Telephone:			
Applicant/Agent Address:								
Legal Description of Area:								
Address (if available) or Locational Description:								
Current Zoning:				Location of land in question with respect to a large recognizable area:				
Is a zone change needed/requested for this land?					Yes	No	N/A	
Requested Zoning:								
Provide preliminary sketch of project. Identify north with arrow. Include land dimensions and street locations. Please attach.								

SURROUNDING LAND USES AND ZONING:

	Land Use	Zoning	City or County
North			
South			
East			
West			

It is proposed that the property will be annexed for the following purposes (e.g., single-family residences, mobile home park, commercial, industrial, right-of-ways, etc). Give area or number of each:

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Percentage of the perimeter of area proposed for annexation contiguous to City limits:

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Number of residential units existing on the property:

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Use Data (As Appropriate):

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Anticipated number of employees:

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Anticipated number of company vehicles:

I hereby certify that I am the owner, applicant or agent named herein and that I have familiarized myself with the rules and regulations with respect to the filing of this application and that the foregoing statements and answers contained on the application and attached map are true and accurate to the best of my knowledge.

ORIGINAL SIGNATURES OF BOTH THE OWNER AND THE AGENT ARE REQUIRED FOR SUBMISSION OF THIS APPLICATION

SIGNATURE OF OWNER:		Date:	
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Print Name:	
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SIGNATURE OF AGENT:		Date:	
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Print Name:	
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