

APPLICATION TO ANNEX PROPERTY

City of Bartow
Post Office Box 1069
Bartow, Florida 33831

This application provides an applicant with a list of required information for use in preparing a request to annex property into the City of Bartow. The request must be submitted as an original form. Additional applications may be obtained by mail or picked up at City Hall. Reproductions of this application will be accepted provided that it is clear and legible.

Please **PRINT** unless otherwise specified: Project Name* _____

Applicant's Name: _____ Owner's Name: _____

Street Address: _____ Street Address: _____

City, State, & Zip: _____ City, State, & Zip: _____

Telephone #: _____ Telephone #: _____

Email Address: _____ Email Address: _____

(Indicate name of company, group, or organization represented.)*

The following information is required on or in acceptable form so as to accompany the annexation request:

- (1) Completed application form with a copy of the deed to the property and certified boundary survey or property appraiser tax map.
- (2) An application fee. (*See Fee Schedule for Appropriate Fee)

Applicant states that she/he has read and understands the instructions on this application. Any false information or misrepresentation made on this application may be grounds for revocation of any approvals issued by the City of Bartow. Approval granted by said Commission in no way constitutes a waiver from any applicable Local, State, or Federal regulations.

Owner's Signature: _____ Date: _____

INSTRUCTIONS TO APPLICANT

1. Abutting property owners may be notified by first class mail of an annexation request. (*“abutting property” is any property located within 150 feet of the boundary of the property being annexed*)
2. An applicant or representative must be present at all public hearings. The reviewing body, at its discretion, may defer action, or take decisive action on any application. If you are not present, the Commission may deny the request.

OFFICE USE ONLY

Receipt # _____ Location _____

Comprehensive Plan FLUM Designation _____ Zoning Classification _____

Property Appraiser Identification Number _____ - _____ - _____

City Commission District Number _____

Coordinates _____

Planning and Zoning Commission Agenda Item # _____ Date _____

City Commission First Reading (Transmittal) _____ Date _____

City Commission Second Reading (Adoption) _____ Date _____