

Project Name:	
•	
Submittal Date:	

VOLUNTARY ANNEXATION PETITION APPLICATION & CHECKLIST

INSTRUCTIONS:

- Fill out the following application prior to submission. Please include any plans for the project.
- Be sure to indicate which type of application at the top of the page.
- Use the most current application from the City's website (<u>www.cityofjarrell.com</u>) or at City Hall.
- City ordinances can be obtained at City Hall or by emailing the City Planner at <u>i.mover@cityofjarrell.com</u>.
- If there are any questions reach out to the Planning Department at (512)-746-4593.

REQUIRED ITEMS FOR APPLICATION:

- Completed annexation petition with each owner's original signature notarized. Much include signatures of all the owners if there are multiple owners of record.
- Copy of deed showing current ownership
- A clear and legible copy of certified field notes, survey, or plat clearly showing the property.

If the property is a subdivided lot, submit a copy of the recorded subdivision plat.

CONTACT INFORMATION:

CONTACT PERSON:		PHONE:	
ADDRESS:			CELL:
CITY:	STATE:	ZIP:	EMAIL:
PROPERTY OWNER(S), IF DIFFERE	PHONE:		
ADDRESS:			CELL:
CITY:	STATE:	ZIP:	EMAIL:

PROJECT INFORMATION:						
Site Address:	County, State, Zip:	Total Acres:	Lot and Block or Parcel:			
Subdivision name: Plat subdivision plat on file?	Yes No					
Survey Name and Abstract Current Land Use:	No:					
Current Zoning: Proposed Land Use and/or l						
Agent Authorization:						
	tion before the Jarrell City Staf erson named below to act as n					
Agent's Name (Printed)		Company Name (if applicable)				
If an agent is representing the conamed above to act as my ager		_	on: I hereby authorize the person off and the Jarrell City Council			
Signature	Name (p	rinted)	Date			

Due at the Time of Application Submission

Signature	Name (printed)		Date		
Owner's Mailing Address	City	State	Zip		
THE STATE OF TEXAS \$ COUNTY OF WILLIAMSON	§				
BEFORE ME, the undersigned author appeared to the foregoing instrument, and acknowled therein expressed and in the capacity the	rity, a Notary Public in and for sa , known to me to be the person vowledged that he/she executed the	whole name is su	bscribed		
GIVEN UNDER MY HAND AND SE	AL OF OFFICE on this the	day of	, 20		

SECOND OWNER (IF APPLICABLE): *Name* (printed) Signature Date Owner's Mailing Address City State Zip THE STATE OF TEXAS **COUNTY OF WILLIAMSON** § **BEFORE ME**, the undersigned authority, a Notary Public in and for said County and State, on this day personally known to me to be the person whole name is subscribed to the foregoing instrument, and acknowledged that he/she executed the same for the purposes and consideration therein expressed and in the capacity therein stated. GIVEN UNDER MY HAND AND SEAL OF OFFICE on this the _____ day of ______, 20_____. Notary Public in and for the State of Texas

My Commission Expires: