



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 (www.cityofjarrell.com) or at City Hall.
- ✦ City ordinances can be obtained at City Hall or by emailing the City Planner at j.byrum@cityofjarrell.com.
- ✦ 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 notarized signature. Must include signatures of all 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 DIFFERENT:			PHONE:	
ADDRESS:			CELL:	
CITY:	STATE:	ZIP:	EMAIL:	



ANNEXATION PETITION

PROJECT INFORMATION:

Site Address:	County, State, Zip:	Total Acres:	Lot and Block or Parcel:

Subdivision Name: _____

Subdivision Plat on File? YES NO

Survey Name and Abstract No.: _____

Current Land Use: _____

Current Zoning: _____

Proposed Land Use and/or Purpose of Annexation:

AGENT AUTHORIZATION:

Please check one of the following:

I will represent my petition before the Jarrell City Staff and the Jarrell City Council

I hereby authorize the person named below to act as my agent in representing this application before the Jarrell City Staff and the Jarrell City Council

Agent's Name (printed)
Company Name (if applicable)

If an agent is representing the owner of the property, complete the following information: I hereby authorize the person named above to act as my agent in processing this application before Jarrell City Staff and Jarrell City Council.

Signature
Name (printed)
Date



SECOND OWNER (IF APPLICABLE):

_____ <i>Signature</i>	_____ <i>Name (printed)</i>	_____ <i>Date</i>	
_____ <i>Owner's Mailing Address</i>	_____ <i>City</i>	_____ <i>State</i>	_____ <i>Zip</i>

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 appeared _____, known to me to be the person's whole name is subscribed to the foregoing instrument, and acknowledged the 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: _____

[seal]

