

Annexation No. _____



PETITION FOR ANNEXATION AND ZONING

Annexation petitions shall provide the following information:

1. DATE: _____, 20____

2. APPLICANT'S NAME* _____

Address: _____

Telephone Number (____) _____ Fax Number (____) _____

Email Address _____

3. PROPERTY OWNER'S NAME _____

Address: _____

Telephone Number (____) _____ Fax Number (____) _____

Email Address _____

PROPERTY OWNER'S NAME _____

Address: _____

Telephone Number (____) _____ Fax Number (____) _____

Email Address _____

PROPERTY OWNER'S NAME _____

Address: _____

Telephone Number (____) _____ Fax Number (____) _____

Email Address _____

*Applicants include: Property owner(s), Engineer(s), Surveyor(s), or Consultant(s)

4. LEGAL DESCRIPTION OF THE SUBJECT PROPERTY: (list all parcels that apply)

Property Address: _____

Tax Map # and Parcel(s): _____

Deed Book and Page: _____

Property Area in Square Feet or Acres: _____

5. PROVIDE SCALED MAP, TO BE ATTACHED, OF THE PROPERTY CLEARLY SHOWING THE PROPERTY'S LOCATION AND PROPERTY AREA IN SQUARE FEET AND/OR ACRES:

6. DESCRIPTION OF APPLICANT'S INTEREST IN THE PROPERTY:

7. DESCRIPTION OF THE PRESENT USE(S) OF THE PROPERTY AND EXISTING ZONING DISTRICT:

8. REQUESTED ZONING FOR THE PROPERTY:

9 DESCRIBE HOW THE REQUESTED ZONING WILL BE CONSISTENT WITH THE OBJECTIVES AND POLICIES OF THE CHARLES TOWN COMPREHENSIVE PLAN:

10. DESCRIPTION OF THE PROPOSED USE(S) OF THE PROPERTY, IF KNOWN:

11. PARCEL HISTORY (List all pending or previously approved applications on the subject parcels inventoried above, including previous site plan applications if this application is a site plan amendment)

Application No.	Project Name and Phase	Status	Approval Date

12. INTERESTED PARTY ADDRESSES, FOR PUBLIC NOTICE: (including across street)
 (Interested parties are defined as adjacent properties within 100 feet)

Owner	# and Street	City, State, Zip

NOTES

Additional exhibits may be required by the Zoning Administrator such as a plot plan or site plan showing existing and if applicable, proposed structures, easements, watercourses, curb cuts and description of the uses of adjacent property that are necessary to describe existing or proposed conditions.

Any desire to amend or withdraw this petition must be submitted in writing to the Zoning Administrator. Also, if ownership of any part of or all of the real property subject to the petition shall change during the pendency of the petition, the Petitioner shall be required to immediately advise the Zoning Administrator in writing.

CERTIFICATION

I certify that, to the best of my knowledge, the submitted information and statements are true and correct. I also certify that I have received and read the City of Charles Town Annexation Policy and relevant provisions of the Charles Town Zoning and Subdivision/Land Development Ordinances outlining applicable procedures.

Signature of Applicant

_____ Date _____

Signature of Owner(s) (If different than Applicant)

_____ Date _____

Signature of Owner(s) (If different than Applicant)

_____ Date _____

Signature of Owner(s) (If different than Applicant)

_____ Date _____

Please submit an original completed petition to the following:

City Planner
City of Charles Town
101 E. Washington Street
Charles Town, WV 25414

FOR CITY USE ONLY

Application Number: _____ Date Petition Received: _____

Fee: \$ _____ Check No. _____ Receipt No. _____

City Council Approval: _____ Date: _____

Comments: _____

