



ANNEXATION APPLICATION

I. BACKGROUND INFORMATION

Applicant/Owner: _____ Phone: _____

Mailing Address: _____

Site Address: _____

Township; Range; Section; Tax Lot: _____

Zone: _____ Parcel Size: _____

Existing Use/Structures: _____

Application Proposal: _____

II. REVIEW CRITERIA

Section 3.111.02.(B)., of the Amity Zoning and Development Code, establishes findings that must be addressed before granting approval of an Annexation. **The applicant must provide a written response to the following:**

Section 3.111.02 (B).

1. Promote an orderly, timely and economical transition of rural and agricultural lands into urbanized lands;
2. Relate to areas with natural hazards;
3. Protect open spaces and scenic views and areas;
4. Provide for transportation needs in a safe, orderly and economic manner;
5. Provide for an orderly and efficient arrangement of public services;
6. Affect identified historical sites and structures and provide for the preservation of such sites and structures;
7. Improve and enhance the economy of the City; and

8. Provide quality, safe housing through a variety of housing types and price ranges.

III. APPLICATION REQUIREMENTS

- A. Completed and signed application form.
- B. Written response to the criteria in Item II., above.
- C. Five (5) copies of the site plan drawn to scale. The site plan must include the following information (where applicable): existing and proposed structures, driveways, parking, landscaping, and significant natural features.
- D. Names and addresses of all the property owners within 150 feet of the boundaries of the property. This list must be provided by a Title Company or the Yamhill County Assessor.
- E. Copy of the latest deed, sales contract, or title report indicating property ownership.

IV. SIGNATURES

NOTE: All owners *MUST* sign this application or submit a letter of consent authorizing another individual to complete and sign application. Incomplete or missing information may delay the review process.

Applicant/Owner Signature	Date
Applicant/Owner Signature	Date

For Office Use Only

Submittal Date: _____ Fee: _____ Received by: _____

Application Type: _____ Completeness: _____ 120 Day: _____

Staff Report Received: _____ Commission Hearing: _____

Application Deposit and Fee paid on: _____ Receipt _____

Cash Check # _____ Refund Yes, on: _____, check # _____ No