

Annexation Application Form Check List

Using this checklist as a guide, please review application materials with applicant or representative **before** accepting application.

1. APPLICATION FORM

_____ Correct Application Form Used (for 60% method or 100% method as applicable)

_____ Original form with original signature(s), address(es) and telephone number(s) obtained

_____ Check to make certain all signatures can be read. If signature(s) is/are illegible, make certain the applicant names are typed or legibly printed near the corresponding signature. (the notation "L.S." on the form stands for *legal signature*)

_____ All legal owners of the property have signed the application form

2. LEGAL DESCRIPTION

_____ Legal description of the subject property accompanies application

_____ Ask the applicant or representative if an electronic copy of the legal description is available; if so, make arrangements for the electronic information to be furnished to either the Community Development Department or City Clerk's Office

3. SECTION 5 VOTING RIGHTS ACT QUESTIONNAIRE

_____ Completed *Section 5 Voting Rights Act Questionnaire* accompanies application

4. MAP OF PROPERTY TO BE ANNEXED

_____ A tax plat, map or other graphic representation of the subject parcel(s) accompanies the application

I have reviewed the annexation application with the applicant(s) and/or representative(s) and have found the submitted paperwork to be complete and in good order.

City staff member signature

Date

This completed form should accompany annexation application materials submitted to the City Clerk's office.

2017 SUBMISSION UNDER SECTION 5
OF THE VOTING RIGHTS ACT
FOR THE CITY OF SMYRNA, GEORGIA

Map Designation# _____ LL/Parcel# _____

City Ward# _____ Census Tract# _____

Copies of annexation ordinance (council meeting minutes) are attached, marked:
Exhibit__

Responsible body: Mayor and Council of the City of Smyrna
P.O. Box 1226
Smyrna, GA 30081
Telephone (770) 434-6600

THIS SECTION TO BE COMPLETED BY APPLICANT. PLEASE BE SURE THIS INFORMATION IS ACCURATE – IT WILL BE USED TO ESTABLISH EMERGENCY SERVICE THROUGH OUR 911 SYSTEM.

1. Is the property to be annexed vacant? Yes[] No []
2. If NO, name of resident(s): _____
3. Complete street address: _____
4. Telephone Number _____
5. Number of registered voters before annexation: _____
Number and type of minorities or minority language groups: _____
6. Number of registered voters after annexation: _____
Number and type of minorities or minority language groups: _____
7. Use of property before annexation (i.e., vacant, business, residential): _____
8. Zoning classification before annexation: _____
9. Use of property after annexation (i.e., vacant, business, residential). If residential, please state proposed number of dwelling units: _____
10. Zoning classification being requested (if any): _____
11. Effect of change on members of racial or minority groups: _____
12. Total number of acres being annexed: _____

City of Smyrna
Application for Annexation

We, the undersigned, who constitute sixty percent (60%) of the electors resident and sixty percent (60%) of the owners of the land by acreage, as described below, which is unincorporated and contiguous to the City of Smyrna, hereby apply to have said area annexed into the City of Smyrna under the provisions of laws of the State of Georgia, said property being annexed being described as follows:

WHEREFORE, THE UNDERSIGNED HEREBY APPLY FOR SUCH ANNEXATION.

Witness the hands and seals of 60% of the electors resident in the annexed area:

_____ Name/Date	(L.S.)	_____ Name/Date	(L.S.)
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_____ Address	_____ Telephone#	_____ Address	_____ Telephone#
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_____ Name/Date	(L.S.)	_____ Name/Date	(L.S.)
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_____ Address	_____ Telephone#	_____ Address	_____ Telephone#
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Witness the hands and seals of 60% of the record title holders of the land described above:

_____ Name/Date	(L.S.)	_____ Name/Date	(L.S.)
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City of Smyrna
Application for Annexation

We, the undersigned, who constitute one hundred percent (100%) of the owners of the land by acreage, as described below, which is unincorporated and contiguous to the City of Smyrna, hereby apply to have said area annexed into the City of Smyrna under the provisions of laws of the State of Georgia, said property being annexed being described as follows:

WHEREFORE, THE UNDERSIGNED HEREBY APPLY FOR SUCH ANNEXATION.

Owner's Printed Name

Owner's Printed Name

Address Telephone#

Address Telephone#

Witness the hands and seals of 100% of the record title holders of the land described above:

Owner's Legal Signature/Date

Owner's Legal Signature/Date