



CITY OF LOGANVILLE  
 Department of Planning & Development  
 P.O. Box 39 • 4385 Pecan Street  
 Loganville, GA 30052  
 770.466.2633 • 770.466.3240 • Fax 770.554.5556

Date: \_\_\_\_\_

Application # **A** \_\_\_\_\_

**REQUEST FOR ANNEXATION**

A PETITION TO ANNEX PROPERTY INTO THE CITY OF LOGANVILLE, GEORGIA

<i>APPLICANT INFORMATION</i>	<i>PROPERTY OWNER INFORMATION*</i>
<b>NAME:</b> _____ <b>ADDRESS:</b> _____ <b>CITY:</b> _____ <b>STATE:</b> _____ <b>Zip:</b> _____ <b>PHONE:</b> _____	<b>NAME:</b> _____ <b>ADDRESS:</b> _____ <b>CITY:</b> _____ <b>STATE:</b> _____ <b>Zip:</b> _____ <b>PHONE:</b> _____ (*attach additional pages if necessary to list all owners)
<b>Applicant is:</b> <input type="checkbox"/> Property Owner <input type="checkbox"/> Contract Purchaser <input type="checkbox"/> Agent <input type="checkbox"/> Attorney	
<b>CONTACT PERSON:</b> _____ <b>PHONE:</b> _____ <b>EMAIL:</b> _____ <b>FAX:</b> _____	
<i>PROPERTY INFORMATION</i>	
<b>MAP &amp; PARCEL #</b> _____ <b>PRESENT ZONING:</b> _____ (Separate rezoning request required) <b>ADDRESS:</b> _____ <b>COUNTY:</b> _____ <b>ACREAGE:</b> _____ <b>PROPOSED DEVELOPMENT:</b> _____	

**You must attach:**  Application Fee     Legal Description     Plat of Property     Letter of Intent  
 Names/Addresses of Abutting Property Owners

**Pre-Application Conference Date:** \_\_\_\_\_

**Accepted by Planning & Development:** \_\_\_\_\_ **DATE:** \_\_\_\_\_ **FEE PAID: \$300.00**

**CHECK #** \_\_\_\_\_ **RECEIPT #** \_\_\_\_\_ **TAKEN BY:** \_\_\_\_\_ **DATE OF LEGAL NOTICE :** \_\_\_\_\_ **NEWSPAPER:** THE WALTON TRIBUNE

**PLANNING COMMISSION RECOMMENDATION:**  Approve     Approve w/conditions     Deny     No Recommendation

**Commission Chairman:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CITY COUNCIL ACTION:**  Approved     Approved w/conditions     Denied     Tabled to \_\_\_\_\_  
 Referred Back to Planning Commission     Withdrawn

\_\_\_\_\_  
 Mayor

\_\_\_\_\_  
 City Clerk

\_\_\_\_\_  
 Date

**Applicant's Certification**

The undersigned hereby certifies that they are authorized by the property owner(s) to make this application and that all information contained herein is complete and accurate, to the best of their knowledge.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name and Title

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal)

\_\_\_\_\_  
Signature of Notary Public

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**Property Owner's Certification**  
(complete a separate form for each owner)

The undersigned hereby certifies that they are: (check all that apply)

- a) \_\_\_\_\_ the owner of record of property contained in this application, and/or
- b) \_\_\_\_\_ the Chief Executive of a corporation or other business entity with ownership interest in the property and is duly authorized to make this application, and

that all information contained in this application is complete and accurate to the best of their knowledge.

\_\_\_\_\_  
Owner's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name and Title

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal)

\_\_\_\_\_  
Signature of Notary Public