



APPLICATION FOR VOLUNTARY ANNEXATION

Property Owner(s)/Agent*: _____

*If corporation or other business entity, the name of the officer or person who maintains authority to represent and execute application.

Address (Property Location): _____

Address (Correspondence)*: _____

*All agendas, letters, and other materials will be mailed.

Property Tax #*: _____

*May attached legal description as separate sheet.

Existing Use: _____ Estimated Household population/occupancy: _____

PBC Land Use: _____ PBC Zoning: _____

OWNER'S AUTHORIZATION

Under the provisions for Voluntary Annexation, Florida Statutes 171.044, requires that the application for annexation must bear the signature of the owner/agent of the property. The authority authorizing a person other than the owner to sign the application must be attached and accompany this application (refer to attached affidavit).

It is understood by the property owner/agent that by signing this agreement is hereby providing written consent to the Stormwater Management Assessment, Garbage Assessment and any other Assessment Fees levied by the Village pursuant to its ordinances and Florida Statutes, Chapters 170 and 197. This consent is a written covenant running with the land. This agreement shall be recorded in the Public Records of Palm Beach County, Florida. The property owner/agent and all subsequent transferees, grantees, heirs, successors, and assigns of the property owner shall be bound by this written consent to the Stormwater Management Assessment, Garbage Assessment and any other Assessment Fees levied by the Village pursuant to its ordinances and Florida Statutes, Chapters 170 and 197.

The property owner/agent agrees that this Application for Voluntary Annexation into the Village of Palm Springs shall be irrevocable by the property owner/agent, their heirs and assigns, and it shall be binding on any future assigns and/or purchasers. It is the property owner's/agent's intent that this Application for Voluntary Annexation shall be binding on all successor title holders of said property.

Owner/Agent: _____
Printed

Signature

Owner/Agent: _____
Printed

Signature

Street Address: _____

Street Address

City, State, Zip Code

City, State, Zip Code

Telephone # Fax #

Telephone # Fax #

Email Address

Email Address

NOTARY

State of _____

County of _____

On this, the _____ day of _____, 20____, before me a notary public, the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to the within instrument, and acknowledged that he executed the same for the purposes therein contained.

In witness hereof, I hereunto set my hand and official seal.

Notary Public