



CITY OF PORT ORANGE
ANNEXATION PETITION APPLICATION
 (Florida Statutes Chapter 171)

Case No.
Date Application Received

Department of Community Development
 1000 City Center Circle
 Port Orange, Florida 32129

Telephone: (386) 506-5674
 Fax: (386) 506-5699
 Website: www.port-orange.org

Instructions: Please type all information (excluding signature lines). Application must be filled out accurately and completely. Do not leave any items blank. In order for an application to be accepted as complete for processing, a consultation must first be held with Department Staff. If you would like to schedule a consultation, please call (386) 506-5674 or stop by the Department of Community Development.

NOTE TO APPLICANT: If you would like assistance in completing this form, please call or stop by the Department of Community Development, (386) 506-5674. Our offices are located on the second floor of City Hall, 1000 City Center Circle. Office hours are Monday through Friday 8:00 a.m. to 4:00 p.m.

Property Address/Location:	_____		
Applicant's Name:	_____		
Address:	_____		
City, State, Zip:	_____		
Email:	_____	Phone:	_____
Applicant is:	<input type="checkbox"/> Contract Purchaser	<input type="checkbox"/> Agent	<input type="checkbox"/> Owner
Property Address/Location:	_____		
Parcel Number:	_____	Property Size:	_____
Current Zoning:	_____	Proposed Zoning:	_____
Current Land Use Designation:	_____		
Proposed Land Use Designation:	_____		

REQUIRED ATTACHMENTS:

- Deed (proof of ownership);
- Survey of the property;
- Vicinity Map indicating that the property is contiguous to the City;
- Petition must be signed by the owner or owners of the property;
- Complete legal description of annexed area by metes and bounds;
- If the contact person/agent/applicant listed on this application is not the owner, a separate notarized authorization form must be provided with the application authorizing that person to represent the property owner; and
- A \$1,100 Processing and Review Fee

Please note: The processing and review fee does not include the legal advertising costs associated with the annexation petition. Advertising fees will be billed separately by the City Clerk's office.

Owner's Name: _____

Address: _____

City, State, Zip: _____

Email: _____ Phone: _____

**AS THE OWNER(S) OF THE PROPERTY DESCRIBED ON THE ATTACHED DEED, WE HEREBY
PETITION THE CITY COUNCIL OF THE CITY OF PORT ORANGE FOR ANNEXATION OF PROPERTY
INTO THE CITY OF PORT ORANGE PURSUANT TO SECTION 171.044, FLORIDA STATUTES.**

OWNER'S SIGNATURE: _____ Date: _____

Please Type Above Signatory's Name: _____

OWNER'S SIGNATURE: _____ Date: _____

Please Type Above Signatory's Name: _____

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online
notarization on this _____ by _____, who is personally
(Date) (Name of Person(s) Acknowledging)
known to me or who has produced _____ as identification and who
(Type of Identification)
did (did not) take an oath.

(Signature) Notary Public, Commission No. _____

(Name of Notary typed, printed or stamped)

The following owner affidavit of authorization is only required with the Applicant is not the Property Owner.

OWNER AFFIDAVIT OF AUTHORIZATION

_____ hereby authorizes _____,
(Property Owner's Name) (Applicant's Name)

and its agents, to make application for _____ to
(Type of Application requested)
the City of Port Orange for property described on the attached application form.

Property Owner's Signature: _____

Please type first and last name of Signatory: _____

Date: _____

**STATE OF FLORIDA
COUNTY OF VOLUSIA**

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online
notarization on this _____ by _____, who is personally
(Date) (Name of Person(s) Acknowledging)
known to me or who has produced _____ as identification and who
(Type of Identification)
did (did not) take an oath.

(Signature) Notary Public, Commission No. _____

(Name of Notary typed, printed or stamped)