



APPLICATION FOR ANNEXATION TO THE WEST BAY SANITARY DISTRICT

Check the applicable box(es) below:

Annexation

On-Site Wastewater Disposal Zone

A. GENERAL INFORMATION

1. Briefly describe the nature of the proposed change of organization or reorganization.

2. What are the reasons for the proposal?

3. Does this application have 100% consent of landowners in the affected area?

___ Yes ___ No

4. Estimated acreage: _____ Assessor's Parcel Number: _____

B. SERVICES

1. List the name or names of all existing cities and special districts whose service area or service responsibility would be altered by the proposed change of organization or reorganization.

- List all changes to the pattern of delivery of local services to the affected area. For each service affected by the proposed change(s) of organization, list the present source of service (state "none" if service is not now provided), the proposed source of service and the source of funding for construction of necessary facilities (if any) and operation. *NOTE: Examples are given on the first two lines of the spaces below.*

<u>SERVICE</u>	<u>PRESENT SOURCE</u>	<u>PROPOSED SOURCE</u>	<u>FUNDING SOURCE</u>	
			<u>CONSTRUCTION</u>	<u>OPERATING</u>
<u>Police</u>	<u>Co. Sheriff</u>	<u>City Police</u>	<u>N/A</u>	<u>Taxes</u>
<u>Sewer</u>	<u>None</u>	<u>WBSD</u>	<u>Proponent</u>	<u>Fees</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

C. PROJECT PROPOSAL INFORMATION

- Please describe the general location of the territory that is the subject of this proposal. Refer to major highways, roads and topographical features.

- Describe the present land use(s) in the subject territory.

- How are adjacent lands used?

North: _____

South: _____

East: _____

West: _____

- Will the proposed change of organization result in additional development? If so, how is the subject territory to be developed?

- What is the general plan designation of the subject territory?

- 6. What is the existing zoning designation of the subject territory?

- 7. What pre-zoning, environmental review or development approvals have already been obtained for development in the subject territory?

- 8. What additional approvals will be required to proceed?

- 9. Does any portion of the subject territory contain any of the following --agricultural preserves, sewer or other service moratorium or wetlands subject to the State Lands Commission jurisdiction?

- 10. If no specific development projects are associated with this proposal, will the proposal increase the potential for development of the property? If so, how?

West Bay Sanitary District will consider the person signing this application as the proponent of the proposed action(s). Notice and other communications regarding this application (including fee payment) will be directed to the proponent at:

NAME: _____

ADDRESS: _____

PHONE: _____

ATTN: _____

 Signature of Proponent

 Signature of Proponent



Supplemental Information for Completing the Annexation Application

A. General Information

1. To annex property into the West Bay Sanitary District.
2. To obtain sewer service to replace existing septic system and reason why: for example, failing septic; plans to remodel, or construct additions; etc.
3. This applies only to the property owners of the parcel to be annexed.
4. self-explanatory

B. Services

1. West Bay Sanitary District
2. Sewer None WBSD Proponent Fees

CONSENT TO INCLUSION OF PROPERTY – Page 4

- The property owners of the parcel need to fill in a date, print and sign their name(s) and the assessor's parcel number.
- Return to WBSD with application.
- **All owners on the title must appear on the form.**

REQUEST TO WAIVE CONDUCTING HEARING AUTHORITY – Page 5

- If property owners wish to simplify the approval process, they need to complete this form exactly like the previous form.
- **All owners on the title must appear on the form.**

