City of Artesia Application for Annexation

Type or Print in BLACK or BLUE ink only:		Case No.
1Property Owner's Name	Address City/State/Zip Phone #	DATE:
2Property Owner's Name	Address City/ State/Zip Phone #	Flood Zone:
AGENT:	Requested Zoning District: Current Use Required Yard Setbacks (Feet):	\$100 Application fee
City/ State/ZipPhone #	FrontRearSideStreet Side (Name)	
	t/Block/Subdivision, Tract, Section-Township/Range) FUTURE LAND USE PLAN Commercial Industrial Public	A N N E X A
Religious InstitutionMix Use	Mobile Home HospitalParkingUndetermin	ned T
SHADED AREA FOR STAFF ONLY		0
Specifications are listed on the Instructional Sheet. All documentation and fees shall be required at the time this application is submitted, unless otherwise noted by Community Development Staff.		
By signing this document, I acknowledge that I have been informed of the dates, times, and locations of the public meetings for the Planning and Zoning Commission and City Council and that I and/or my agent shall attend the meetings in order to fulfill the requirements of this application. Description of the public and the dates, times, and locations of the public meetings for the Planning and Zoning Commission and City Council and that I and/or my agent shall attend the meetings in order to fulfill the requirements of this application.		
Property Owner's Signature (s)	Agent's Signature	