



APPLICATION FOR ANNEXATION

TOWN OF HILLIARD, FLORIDA

Updated April, 2011

APPLICATION FOR ANNEXATION OF LAND – TOWN OF HILLIARD

DATE FILED

APPLICATION NO.

TO: The Planning and Zoning Board of Hilliard Florida. The undersigned hereby applies for annexation of land described as follows:

APPLICANTS NAME: _____

ADDRESS: _____

PHONE NO.: _____

1. Attach a Legal description of land sought to be annexed by metes and bounds, street address together with a recent survey of the property proposed for annexation and map clearly showing the area to be annexed, showing the following:
 - Location map, drawn to scale showing the relationship of the subject property to the town boundaries and surrounding developments.
 - Property boundary lines.
 - Easements.
 - Adjacent streets, (Names and rights-of-way).
 - The property's current zoning district classification and future land use designation.

Block _____ Lot(s) _____

Plat Book _____ Page _____

Other _____

2. Property Owner: The full name and address of the owner as shown in the public records of Nassau County. If same as applicant, so state.

3. Adjacent Property Owner: List the names and addresses of all property owners within 300 feet of property boundaries. Names can be obtained from the Property Appraiser's Office, or from their web-site, www.nassauflpa.com . Please print the label form of the list.

4. Reason For Annexation. The reason annexation is being sought and supporting data as to why such annexation should be made.

5. Total Area: Total area of parcel to be annexed (square feet/Number of acres):

6. Minimum Frontage/Width: Minimum average width and street frontage of parcel sought to be annexed is: Width _____ Frontage _____

In filing this Annexation Application, the undersigned understands it becomes a part of the Official Records of the Town of Hilliard, and does hereby certify that all information contained herein is true to the best of their knowledge.

OWNER: _____
Signature

AGENT: _____
Signature

Address: _____

Telephone Number: (____) _____

Please review your application. No application will be accepted as “Complete and filed” until all requested information has been supplied and the required fee paid.

**TOWN OF HILLIARD
INSTRUCTIONS AND APPLICATION
FOR ANNEXATION OF LAND**

The following instructions are required to be followed by the applicant in the preparation of an application for the annexation of land. Please type or print application legibly. If there is not enough space on the forms to fully answer the questions, attach additional sheets (8 ½” by 11” letter size paper) with the answers identified by the number of the questions on the application. The following information is furnished to provide explanation of the questions.

It is most important that all required information be furnished accurately and in detail, as incorrect information can delay or nullify any action on the application. Use the forms furnished by the Zoning Department, located at Hilliard Town Hall, 15859 West County Road 108, Hilliard, Florida.

1. The legal description of the parcel of land upon which annexation is sought shall be as shown on the deed(s) of the property, or as determined on a survey. A reference to the Township, Range or Deed Book will not be sufficient; an actual metes and bounds description of the boundaries of the property is required. If there is no sufficient space on the forms, use additional 8 ½” by 11” sheets.
2. Provide the name(s) and address of the current owner(s) of the property. Such owner’s name should agree with the Public Records of Nassau County, as they exist on the date of the application for annexation. If the name of the owner is different than that shown on the Public Record, attach a statement explaining the reason.
3. It is a requirement of law that all owners within 300 feet of the parcel be notified. You are not required to obtain the signatures or approval of the adjoining owners, but you must provide a list showing their names and addresses, including zip code. The names of the owners on such list shall include all properties within 300 feet drawn from the corners of the parcel. It is requested that you contact the Property Appraiser’s Office, or their web-site www.nassauflpa.com to obtain the listing and addresses of record.
4. The Zoning Board will take into consideration certain factors in their determination if the application is to be recommended for approval. Although none of these factors alone will be the basis of such determination, it would be helpful to the Zoning Board if the applicant provides as much information as possible concerning the following where applicable:
 - a) Would the proposed annexation materially alter the population density pattern and thereby overload public facilities such as schools, utilities, streets, etc.?
 - b) Do changes or changing conditions make the approval of the proposed annexation desirable?
 - c) Will the proposed annexation adversely influence living conditions in the neighborhood?

- d) Will the proposed annexation create drainage problems?
- e) Will the proposed annexation be a deterrent to the improvement of development of adjacent property in accord with existing regulations?
- f) Will the proposed annexation effect property values in the adjacent area?
- g) Will the proposed annexation constitute a grant of special privilege to an individual owner as contrasted with the public welfare?
- h) Is the proposed annexation out of scale with the needs of the neighborhood or the town?

It is not required that you answer all or any of the above questions, but this information is furnished to the applicant to indicate the type of factors which the Zoning Board will consider in reviewing the application.

It is required that the application be accompanied by a survey or plot drawing of the parcel sought to be annexed drawn to a scale that is clearly legible and contained in its entirety on a sheet not to exceed 8 ½" by 14" (legal size). Such drawing must show the boundaries, dimensions, corners, streets, legal description, location with respect to a street intersection, corner monument or other known reference point, area of the parcel and other information normally included on a survey drawing. A copy of the survey drawing is usually provided with the deed when the property was purchased, and will usually be satisfactory.

The application should be signed by the owner(s) of record of the property sought to be annexed, or by their authorized agent. If the signature is by agent, attach a notarized written authorization of such agent to act in the owner's behalf. **The telephone number of the person who can be contacted and is familiar with this application would be helpful as often it is necessary to obtain additional information.**

The fee for an application for the Annexation of Land is set by Resolution by the Town Council. Personnel at Town Hall can advise you of the amount of fee(s). The fee charged does not include the cost of advertisement. Such fee shall be paid to the Town Clerk. Please make check payable to: Town of Hilliard. **Return the completed application, the survey or plot drawing and any supporting data to the personnel at Hilliard Town Hall, 15859 West County Road 108, Hilliard, Florida.**

The Zoning Code requires that notice must be given of the Public Hearing by publication in an approved newspaper of general circulation no less than fifteen (15) days in advance of the Public Hearing. The Land Use Administrator will prepare the form of the advertisement and will set for publication. The Public Hearing of the application cannot be held unless proof of publication is in the record. Applicant must pay a deposit fee for newspaper advertisement.

A sign shall be posted on the property by the Land Use Administrator to notify the public that a Public Hearing will be held on the annexation application. The sign must be posted not less than fifteen (15) days prior to the Public Hearing and remain posted until after all Public Hearings have been held. It is requested the applicant notify Town Hall should the sign not remain clearly legible and visible during the time the application is being considered.

If for any reason you wish to withdraw the application, you must notify the Land Use Administrator prior to the date of the Public Hearing. **No refund of fees paid will be made if the application is withdrawn.**

It is suggested that you maintain contact with the Land Use Administrator as to the progress of the application, and that you appear at the Public Hearing to answer any questions that may be asked by the Board.

The Town of Hilliard Planning and Zoning Board meets on the first Tuesday of every month at 7:00 P.M. in the Town Hall, Council Chambers, 15859 West County Road 108, Hilliard, Florida 32046.

Applications must be received by the Land Use Administrator at least 30 days prior to the Public Hearing to allow sufficient time for review, advertisement in the newspaper and for notifications to be sent out to all property owners within 300 feet of the proposed Annexation.

DATE STAMP:

Accepted By: _____

Date Filed: _____

**APPLICATION FOR ANNEXATION
TOWN OF HILLIARD, FLORIDA**

Application No. _____

Application Fee: _____

1. Required Information

APPLICANT'S INFORMATION

Applicant(s) _____

Telephone: _____

Address: _____

Fax: _____

Address 2: _____

E-mail: _____

OWNER'S INFORMATION

Owner (1): _____

Telephone: _____

Address: _____

Fax: _____

Address 2: _____

E-mail: _____

Owner (2): _____

Telephone: _____

Address: _____

Fax: _____

Address 2: _____

E-mail: _____

APPLICANT'S AGENT

Name: _____

Telephone: _____

Address: _____

Fax: _____

Address 2: _____

E-mail: _____

APPLICANT'S REGISTERED SURVEYOR

Name: _____

Telephone: _____

Address: _____

Fax: _____

Address 2: _____

E-mail: _____

PROPERTY INFORMATION

Project Name: _____

Street Address: _____

Lot Number: _____ Block Number: _____ Subdivision: _____

Section: _____ Township: _____ Range: _____

Nearest Street Intersection: _____

Parcel Identification Number(s) _____

AREA INFORMATION

Under One Acre: Square Footage: _____ Over One Acre: Acres: _____

Number of Lots/Parcels: _____ Existing Zoning Classification: _____

Existing Future Land Use Classification: _____

Existing Land Use: _____

**OWNER'S AUTHORIZATION FOR AGENT
PLANNING DEPARTMENT**

TOWN OF HILLIARD, FLORIDA

**EACH AND EVERY OWNER SHOWN ON THE PROOF OF
OWNERSHIP MUST SIGN AN AUTHORIZATION FORM**

Agent Authorization Form

I/WE _____
(Print Name of Property Owner)

hereby authorize _____
(Print Name of Agent)

to represent me/us in processing an application for _____
(Type of Application)

on our behalf. In authorizing the agent to represent me/us, I/we, as owner(s) attest that the application is made in good faith and that any information contained in the application is accurate and complete.

(Signature of Owner)

(Signature of Owner)

(Print Name of Owner)

(Print Name of Owner)

State of Florida

} ss

Nassau County

Sworn to and subscribed before me on this _____ day of _____, 20____,
by _____
(Name of Person Making Statement)

**Signature of Notary Public
State of Florida**

**Print, type or stamp commissioned name
of Notary Public**

My Commission Expires: _____

Individual making statement is _____ personally known or _____ produced identification.

Type of identification produced: _____

CONDITIONS:

I/We also understand that the application fee does not include the fees associated with engineering review and/or construction inspection, reports and the like, required by the Town of Hilliard.

I/We certify that no land clearing, excavation and/or filling has occurred on this property, and that no clearing, excavation and/or filling will commence prior to a Site Plan Review. I/We do hereby agree to perform any authorized land clearing, excavation and/or filling in accordance with the approved Site Plan and the Town of Hilliard Land Development Regulations.

By signature, I/We acknowledge that I/we have read, understand and agree to the above conditions.

Owner(s)	Agent(s)

The undersigned having been sworn on oath, states the above information is true and correct as (s)he is informed and believes.

Signature of Owner(s) or Agent	Printed Name of Owner(s) or Agent(s)

State of Florida

} ss

Nassau County

Individual making statement is ____ personally known or _____ produced identification.

Type of identification produced: _____

Sworn to and subscribed before me on this _____ day of _____, 20____,
by _____
(Name of Person Making Statement)

Signature of Notary Public
State of Florida

Print, type or stamp commissioned name
of Notary Public

My Commission Expires: _____