



CITY OF APOPKA
COMMUNITY DEVELOPMENT DEPARTMENT
120 E. MAIN STREET
P. O. BOX 1229
APOPKA, FLORIDA 32704-1229
407-703-1739 (Phone) - - 407-703-1791 (Fax)

APPLICATION FOR ANNEXATION
(Comprehensive Land Use and Zoning Amendments Included)

Date Submitted:		Fee Paid: <p style="text-align: center;">NONE REQUIRED</p>	
Owner of Record:		Phone:	
		E-Mail:	
Address:			
City:		State:	Zip:
Applicant:		Phone:	
		E-mail:	
Address:			
City:		State:	Zip:

LEGAL DESCRIPTION OF PROPERTY TO BE ANNEXED - Parcel Number(s):			
Please attach a copy of the Warranty Deed or Certificate of Title.			
Subject Property Address:			
SIZE OF PROPERTY			
Acreage		+/-	OR Square Feet:
Existing Use:		Proposed Use:	

I (We) hereby appoint (print name): _____ to serve as representative at all public hearings regarding my (our) property.

I (We), the undersigned owner(s) for the Future Land Use and/or Zoning Amendment of the above described property in the City of Apopka, Florida, do hereby agree to Indemnify and Hold Harmless the City of Apopka, Florida, its elected officials, officers, agents, and assigns for any and all damages, attorney fees and costs incurred by said City in any instance in which the City must expend funds and/or defend its decisions regarding the granting of the above referenced application.

BY: _____
Owner(s) of Record (Signature)

BY: _____
Owner(s) of Record (Signature)

STATE OF FLORIDA
COUNTY OF ORANGE

The foregoing instrument was acknowledged before me on this _____ day of _____, 20_____, by _____ who is personally known to me or has produced _____ as Identification and who did / did not (circle one) take an oath.

Notary Public (Signature)

My Commission Expires: _____

Notary Public (Print Name)