City of Columbus - Bartholomew County Planning Department

Petition for Annexation into the City of Columbus, Indiana

Submit the petition by e-mail to <u>planning@columbus.in.gov</u>. If questions, please call: 812.376.2550. Submittal instructions available at <u>https://www.columbus.in.gov/planning/applications-forms/</u>.

	lanning Depa	artment				
Petition Received on (date):	b	y (initials):				
Case Reference No.:		Current Zo	oning Distric	t:		
Total Annexation Area (including ac	ljacent right-of-wa	ay, etc.):		_ Town	ship:	
To be Completed by the Pet	itioner					
Annexation Area Parcel Nu	nber(s):					
Please list below the numbers of all	. ,	d to be included in	the annexa	tion (Sample:	03-95-25-1	20-002.600-005).
Columbus Property Tax Rate Exer rate after annexation any property th agricultural assessment. Please che	at is assessed a	s agricultural land	at the time	of annexation	for so long	as it retains that
	Г	7				
Copy of Deeds Attached A legal description is required for all	l annexation reque	sts; please attach a	deed for ever	y property to be	e included in t	he annexation area.
Representative Information	•	•				
Complete this section if a surveyor, attorn should be directed to them (if not, please					spondence re	garding the petition
	indicate "none" for	r the Representative	Person's Na	me below).		
should be directed to them (if not, please	indicate "none" foi	r the Representative	Person's Na	me below).		· ·
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: _ Mailing Address:	indicate "none" for	r the Representative	Person's Na	me below).		·
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: _ Mailing Address: (number) (street)	indicate "none" for	r the Representative	Person's Na	me below).		
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: _ Mailing Address:	E-mail Address	r the Representative	Person's Na (city)	me below).	(state)	(zip)
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: _ Mailing Address: (number) (street) Phone No.:	E-mail Address aail unless anotl	r the Representative	(city)	me below).	(state) e Planning	(zip)
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: Mailing Address: (number) (street) Phone No.: All correspondance will be by e-m Petitioner Information: Please identify the property owner, land or other representative (see Representation) Petitioner Name:	E-mail Address aail unless anotl	r the Representative	(city)	me below).	(state) e Planning	(zip)
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: Mailing Address: (number) (street) Phone No.: All correspondance will be by e-m Petitioner Information: Please identify the property owner, land or other representative (see Representation) Petitioner Name:	E-mail Address Bail unless anotl development comp tive Information sec	r the Representative	City)	me below).	(state) e Planning <u>NOT</u> list here	(zip) Department. a surveyor, attorney, Other
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: Mailing Address: (number) (street) Phone No.: All correspondance will be by e-m Petitioner Information: Please identify the property owner, land or other representative (see Representat Petitioner Name: Petitioner Type: [] Individual(s) Petitioner Contact Person Name: Please include a contact person name if Mailing Address:	E-mail Address Bail unless anotl development comp tive Information sec	r the Representative	Person's Na (city) (city) Deen agree seeking the a LLC Dompany, instit	me below).	(state) e Planning <u>NOT</u> list here Trust , or other type	(zip) Department. a surveyor, attorney, Other of entity.
should be directed to them (if not, please Representative Person's Name: Representative's Company Name: Mailing Address: (number) (street) Phone No.: All correspondance will be by e-m Petitioner Information: Please identify the property owner, land or other representative (see Representation Petitioner Name: Petitioner Type: [] Individual(s) [] Petitioner Contact Person Name: Please include a contact person name if	E-mail Address ail unless anot development comp ive Information sec D Partnership the petitioner is a l	r the Representative	City)	me below).	(state) e Planning <u>NOT</u> list here	(zip) Department. a surveyor, attorney, Other

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Annexation Reason:

Explain the reason(s) for the requested annexation.

Representative or Petitioner Signature / Acknowledgement:

If a representative has been designated on page 1, that representative must sign below. If no representative is designated, the petitioner, as indicated on page 1, must sign below. Acceptable signatures include traditional "wet" by hand signatures, electronically verified signatures, or digital signatures using a script font or signature stamp.

The undersigned acknowledges that the information included in and with this petition is completely true and correct to the best of his/her knowledge and belief.

(Representative or Petitioner Signature)

(Date)

(Representative or Petitioner Printed Name)

(Title / Position, if Applicable)

Property Owner Information & Signature(s):

Petitions submitted without all property owner(s) or their legally authorized representative(s) signatures will <u>NOT</u> be processed. Acceptable signatures include traditional "wet" by hand signatures, electronically verified signatures, or digital signatures using a script font or signature stamp. The property owner does <u>NOT</u> include a tenant or contract buyer.

The Planning Department is <u>NOT</u> responsible for verifying the authenticity of signatures, confirming the signer's authority, or for any misrepresentation by those signing.

Those who have signed below acknowledge that the information included in and with this petition is completely true and correct to the best of his/her knowledge and belief. The undersigned authorize(s) the filing of this petition and allows the Planning Department staff to enter this property to analyze this request.

For Property Owned by an Individual or Individuals:

If the property is titled/owned individually or jointly held by multiple individuals (such as a married couple, tenants-in-common, or jointly with rights of survivorship, for example), each living individual must sign below. Those signing below due to power of attorney for an owner must attach documentation of that power of attorney.

(Property Owner #1 Signature)	(Printed Name)	(Date)
(Property Owner #2 Signature)	(Printed Name)	(Date)
(Property Owner #3 Signature)	(Printed Name)	(Date)
(Property Owner #4 Signature)	(Printed Name)	(Date)

For Property Owned by a Partnership, Corporation, LLC, Estate, Trust, or other Entity:

If the property is titled/owned by a trust, corporation, estate, institution, business, or other entity, an appropriate representative of that entity must sign below and indicate his/her title, position, role, or other legally authorized capacity in which they are signing on behalf of that entity.

Description of Signer's Ownership Role or Representation:

City of Columbus - Bartholomew County Planning Department Petition for Annexation into the City of Columbus, Indiana Supplemental Property Owner Signature

This petition supplement provides the required signature of a property owner who is unable, due to distance, technology limitations, or other factors, to include their signature on the primary petition form.

To be Completed by the Planning Department

This Supplement Received on (date): _____ by (initials): _

Case Reference No.: _

To be Completed by the Petitioner

Annexation Petitioner Name: _

Annexation Area Parcel Number(s):

Supplemental Property Owner Signature:

Acceptable signatures include traditional "wet" by hand signatures, electronically verified signatures, or digital signatures using a script font or signature stamp. The property owner does <u>NOT</u> include a tenant or contract buyer. Those signing below due to power of attorney for an owner must attach documentation of that power of attorney.

The Planning Department is <u>NOT</u> responsible for verifying the authenticity of signatures, confirming the signer's authority, or for any misrepresentation by those signing.

The undersigned acknowledges that the information included in and with the petition referenced above is completely true and correct to the best of his/her knowledge and belief. The undersigned authorizes the filing of this petition and allows the Planning Department staff to enter this property to analyze this request.

(Property Owner Signature)

(Printed Name)

(Date)