



City of Dawsonville
Planning and Zoning Department
 415 Highway 53 East, Suite 100
 Dawsonville, GA 30534
 Phone: (706) 265-3256

**Annexation Petition
 Application**

ANNEXATION # _____

ZONING AMENDMENT APPLICATION AND FEES RECEIVED ? YES NO

Applicant Name(s): _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____

Cell Number(s): _____

Property Owner's Name(s): _____

Address: _____ City: _____ State: _____ Zip: _____

E-Mail: _____

Property Owner's Telephone Number(s): _____

Address of Property to be Annexed: _____

TMP #: _____ Acre(s): _____ Survey Recorded in Plat Book # Page #: _____

Land Lot #: _____ District #: _____ Section # _____ Legal Recorded in Deed Book # Page #: _____

Current Use of Property: _____

County Zoning Classification: _____ City Zoning Classification: _____

Land Use & Zoning Ordinance, Article VII. General Provisions Sec. 708. Annexation: Any land area subsequently added to the incorporated area of Dawsonville shall automatically be classified R-1 (single-family residential district) until or unless otherwise classified by amendment to the official zoning map.

Petition **MUST** include a completed application with signatures and **ALL** attachments.

- An 8 ½ x 11 copy of the current RECORDED BOUNDARY SURVEY of said property showing the contiguity of said property to the existing corporate limits of the City of Dawsonville, GA.
- A copy of the current metes and bounds LEGAL DESCRIPTION that matches the boundary survey of the property being annexed.
- Survey must be signed and sealed by a Registered Land Surveyor.
- Survey must be signed, stamped recorded by Dawson County Clerk's of the Court office.

FEE SCHEDULE

Annexation Fee	\$300.00
Administrative fee	\$100.00
Public Notice Certified Mail	**per adjacent property owner

*****price is determined by USPS***

Office Use Only	
Date Completed Application Rec'd:	Amount Paid: \$ CK Cash CC
Date of Planning Commission Meeting:	Dates Advertised:
Date of City Council Meeting:	Rescheduled for next Meeting:
Date of City Council Meeting:	Approved by City Council: YES NO
Approved by Planning Commission: YES NO	Postponed: YES NO Date:



**City of Dawsonville
Planning and Zoning Department**

415 Highway 53 East, Suite 100
Dawsonville, GA 30534
Phone: (706) 265-3256

**Annexation Petition
Application**

Property Owner(s) Authorization

I / We the undersigned, being the owner(s) of real property of the territory described herein as _____ (Address/Tax Map Parcel) , respectfully request that the Mayor and City Council of the City of Dawsonville, Georgia annex this property into the City and extend the City boundaries to include the same.

Upon signature of this document, I / We the undersigned certify that all the information provided is true and accurate to the best of our knowledge.

Property Owner Signature

Property Owner Printed Name

Property Owner Signature

Property Owner Printed Name

Applicant Signature

Applicant Printed Name

Applicant Signature

Applicant Printed Name

State of Georgia

County of _____

Sworn to and subscribed before me this

this _____ day of _____ 20____

Notary Public, State of Georgia

My Commission Expires: _____

Notary Seal

Planning Commission Meeting Date: _____

Date(s) Advertised: _____

1st City Council Reading Date: _____

2nd City Council Reading Date: _____

Approved: YES NO

Date Certified Mail to: _____ County Board of Commissioners & Chairman _____ County Manager _____ County Attorney

Letter Received from Dawson County Date: _____



**City of Dawsonville
Planning and Zoning Department**

415 Highway 53 East, Suite 100
Dawsonville, GA 30534
Phone: (706) 265-3256

**Annexation Petition
Application**

Application # **ANX** _____ TMP#: _____

It is the responsibility of the applicant to provide a list of adjacent property owners. This list must include the name and address of anyone who has property touching your property or who has property directly across the street from your property. (Use additional sheets if necessary)

****Please note**** This information should be obtained at the Planning Office using the Tax Map Parcel Map listing any parcel(s) adjoining or adjacent to parcel where rezone is being requested.

TMP # _____ 1. Name(s): _____
Address: _____

TMP # _____ 2. Name(s): _____
Address: _____

TMP # _____ 3. Name(s): _____
Address: _____

TMP # _____ 4. Name(s): _____
Address: _____

TMP # _____ 5. Name(s): _____
Address: _____

TMP # _____ 6. Name(s): _____
Address: _____

TMP # _____ 7. Name(s): _____
Address: _____

THE APPLICANT, OR DESIGNED AGENT, **MUST*** ATTEND THE PUBLIC HEARINGS FOR THE CONDITIONAL USE REQUEST TO BE CONSIDERED.

***NOTE:** if the applicant of a petition before the Planning Commission fails to attend the public hearing, then the Planning Commission may deny the subject petition or may require re-advertisement of the subject petition at the expense of the applicant.