



# CITY OF BROOKSVILLE

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## PETITION FOR VOLUNTARY ANNEXATION AND AMENDMENT OF THE FUTURE LAND USE MAP OF THE BROOKSVILLE COMPREHENSIVE PLAN

**(DO NOT WRITE IN THIS SPACE, FOR CITY OFFICE USE ONLY)**

Petition # \_\_\_\_\_ Annexation \_\_\_\_\_ FLUMA \_\_\_\_\_

Date received: \_\_\_\_\_ Amount Paid: \$ \_\_\_\_\_

Tentative dates of Hearings: \_\_\_\_\_

### **Property Owner**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone/Fax: \_\_\_\_\_

### **Applicant**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone/Fax: \_\_\_\_\_

### **Agent**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone/Fax: \_\_\_\_\_

**General Information**

Property Location and/or Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Tax Parcel #: \_\_\_\_\_ Parcel Key #: \_\_\_\_\_

Site Acreage:

(a) Incorporated Area: \_\_\_\_\_

(b) Unincorporated Area: \_\_\_\_\_

(c) TOTAL ACREAGE \_\_\_\_\_

**Existing and Proposed Land Use & Zoning Information**

Present Zoning/Land Use Map Designation: \_\_\_\_\_

Proposed Zoning/Land Use Map Designation: \_\_\_\_\_

Land Use Map Amendment Required: Yes \_\_\_\_\_ No \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**For All Development:**

Flood Zone: \_\_\_\_\_ Base Elevation Required: \_\_\_\_\_

**Residential Development:**

Total # Units: \_\_\_\_\_ Single Family: \_\_\_\_\_ Multi-Family: \_\_\_\_\_

**Non Residential Development:**

Total Non-Residential Floor Area: \_\_\_\_\_

Commercial \_\_\_\_\_ Professional \_\_\_\_\_ Industrial \_\_\_\_\_

Mixed Use \_\_\_\_\_

**Description of Existing Land Uses on the subject property:**

**Description of Existing Land Uses surrounding the subject property:**

**Proposed Use of the subject property (development description, schedule, and phases):**

**Maximum allowable density under adopted future land use map designation:**

**Maximum allowable density under proposed future land use map designation:**

**Analysis of Soils and topography on the site:**

**Analysis of flood prone areas on the site:**

**Analysis of vegetation and natural resources on the site:**

**Analysis of historical/archeological resources on the site:**

**Analysis of the relationship of the amendment to adopted population projections:**

**Analysis of the impact of amendment on levels of service:**

**Traffic:**

**Potable Water:**

**Sanitary Sewer:**

**Drainage:**

**Solid Waste:**

**Parks and Recreation:**

**Submittal Requirements**

*The following **MUST** be furnished with this application:*

Signed and sealed survey

Application Form

Justification for analysis responses (computations, copies of original analyses)

Proof of Ownership (Warranty Deed, Title Certification, etc.)

Application fee(s):

Comprehensive Plan Amendments:

Text Amendment (\$750.00 + Admin. Costs).....\$ \_\_\_\_\_

Map Amendment (\$750.00+ Admin. Costs).....\$ \_\_\_\_\_

Voluntary Annexation.....\$ No Fee

Advertising Fee (to be billed to petitioner by newspaper).....\$ \_\_\_\_\_

Certified Letters @\$6.47 (+\$1.00 per letter-Admin. Costs).....\$ \_\_\_\_\_

**AFFIDAVIT TO AUTHORIZE AGENT**

I/we, \_\_\_\_\_, the owner(s) in fee simple of the below described real property hereby appoint \_\_\_\_\_ as my (our) agent to file any and all petitions, sign required documents, make representations as to the issues of fact and to appear, as may be necessary, before the appropriate City of Brooksville authority. The authorized agent shall also have the authority to commit myself as the Owner(s) to the necessary future performance conditions as may be directed by the appropriate City authority as a condition of granting my petition.

Tax Parcel # \_\_\_\_\_ Parcel Key # \_\_\_\_\_

Date: \_\_\_\_\_ Owner: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print

Owner: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print

*State of* \_\_\_\_\_  
*County of* \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_\_\_ by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Notary Seal or Stamp

**OWNER /OWNER’S AGENT AFFIDAVIT**

I (we), the undersigned, certify ownership of the property within this application, that said ownership has been fully divulged, whether such ownership be contingent or absolute, and that the name of all parties to an existing contract for sale or any options are filed with this application. It is understood that this application must be complete and accurate and the fee paid prior to processing.

Tax Parcel # \_\_\_\_\_ Parcel Key # \_\_\_\_\_

Date: \_\_\_\_\_ Owner or Owner’s Agent: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print

Owner or Owner’s Agent: \_\_\_\_\_  
Signature

\_\_\_\_\_  
Print

*State of* \_\_\_\_\_  
*County of* \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, A.D. 20\_\_ by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Notary Seal or Stamp

## PETITION ACKNOWLEDGMENT

This petition is filed pursuant to Section 171.044, Florida Statutes, for the purpose of voluntarily annexing the below described property into the City of Brooksville. This land is situated in the State of Florida, County of Hernando, and is contiguous to the present city boundary and is reasonably compact.

Legal Description:

Tax Parcel # \_\_\_\_\_ Parcel Key # \_\_\_\_\_

I/we, \_\_\_\_\_, do hereby state and affirm that all answers to the questions in this application and all sketches and data attached to and made part of this application are honest and true to the best of my knowledge and belief. I further state and affirm that this petition contains the signatures of all the owners of the property proposed to be annexed.

Date: \_\_\_\_\_ Owner or Agent: \_\_\_\_\_

**STATE OF** \_\_\_\_\_  
**COUNTY OF** \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
SIGNATURE OF NOTARY

\_\_\_\_\_  
NOTARY SEAL/STAMP