

City of Waleska, Georgia Petition for Annexation 100% Method

Please complete one petition per parcel; duplicate this form as needed. Please print or type.

Applicant Information Date:		
Applicant's Name:		
Corporation Name:		
Mailing Address:		
Phone:		
Email:		
Mailing Address:		
Property Information Tax Map #: Land Lot (s) District:	Parcel #:	
Physical Address:		

Property Location Description: _____

Current Zoning: _____

(Attach additional sheets, if necessary)

Has an application for rezoning, special use, or variance been applied for in the County within the past five (5) years? ______ If "yes" please provide complete explanation and details in the space below: ______

(Attach additional sheets, if necessary)

Describe the proposed development for the property in question should the annexation be approved, including the appropriate City zoning classification desired. (NOTE: Any Annexation request requiring a rezoning in the City will need to be made on the appropriate rezoning request forms for the City of Waleska. This annexation petition does not complete the requirements for making a rezoning request).

(Attach additional sheets, if necessary)

<u>Submittal Checklist</u> The following exhibits must be attached to this Annexation Petition:

_____ A copy of the most recent warranty deed or equivalent conveyance of ownership for the property to be annexed.

_____ A copy of the Cherokee County Tax Plat, illustrating the property to be annexed.

_____ Complete the Applicant & Property Owner (s) Signature Sections, following page;

_____ Any additional information requested by City Officials.

Applicant & Property Owners Signature Section

Applicant Name (Please Print)

Corporation Name (Please Print)

Title (Please Print)

Applicant Signature

ALL PROPERTY OWNERS (GRANTEES) MUST SIGN BELOW AS INCLUDED ON THE ATTACHED DEED OR CONVEYANCE.

Property Owner Name (Please Print)

Property Owner Signature

Property Owner Name (Please Print)

Property Owner Signature

Property Owner Name (Please Print)

Property Owner Signature

Notary (form must be notarized)

Received By: ____

City of Waleska

Date: _____

Date

Date

Date



Affidavit of Compliance with O.C.G.A. 50-36-1 "Verification of Lawful Presence within the United States."

O.C.G.A. 50-36-1 requires that applicants applying for such things as licenses for pulic benefits complete a signed and sworn affidavit verifying the applicant's lawful presence in the United States. Therefore, the applicant must answer the following questions:

 The applicant is a U.S. citizen or legal permanent resident at least eighteen (18) years old.

 Yes
 No
 or
 If Not:

The applicant is a qualified alien or nonimmigrant under the federal Immigration and Nationality Act, Title 8 U.S.C., as amended, at least eighteen (18) years old, and is lawful present in the United States. *A photo static copy of the applicant's alien card issued by the Department of Homeland Security or other federal immigration agency must be included with this document.* *

O.C.G.A. 50-36-1 states that "Any person who knowingly and willfully makes a false, fictitious, fraudulent statement of representation in an affidavit executed pursuant to this Code section shall be guilty of a violation of Code Section 16-10-20."

I declare, under penalty of law, that this affidavit has been completed by me and is true and correct.

Signature

Date

Title

Legal Company Name

Company Address	
(Must be signed that	is personally known, or verified by me,
that the applicant signed this application after stating understanding of all statements and, under oath actua statements and answers contained in this affidavit are	ally administered by me, has sworn that the
SUBSCRIBED AND SWORN BEFORE ME ON THIS	
DAY OF, 20	

Notary Public

Seal

*All Applicants must attach a copy of a secure and verifiable document as defined in 0.C.G.A. 50-36-2