



HAINES CITY

THE HEART OF FLORIDA

Development Services
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ANNEXATION PETITION AND CONSENT APPLICATION

(Internal Office Use Only)

Received date: _____ Project number: _____
Taxable value: _____
Total acreage assessed property value: _____

The following information is required for a submission of an application to annex into the city limits of Haines City.

OCCUPANCY

_____ Residential _____ Commercial

Parcel ID number (s): _____
Property name: _____
Property address: _____
Property subdivision: _____
Property Lot Number: _____ Zoning district: _____

Proof of property ownership - (attach a copy of the deed)

Reason for annexation: _____

Present use of property: _____

Existing structures on site: _____

Number of residents on site: _____

Names of registered voters residing on property:

1. _____

2. _____

3. _____

4. _____

5. _____

(if more than five registered voters, please attach a separate sheet)

(I), (We), understand that this petition becomes a part of the permanent record of Haines City. (I), (We), hereby certify that the above statement and the statements of showings made in any paper or plans submitted herewith are true to the best of (My), (Our) knowledge and belief.

Signature of owner: _____

Printed name of owner: _____

Date sign: _____

Signature of applicant: _____

Printed name of applicant: _____

Date sign: _____