## Annexation Application Form Check List

Using this checklist as a guide, please review application materials with applicant or representative **before** accepting application.

1.	APPLICATION FORM			
	Correct Application Form Used (for 60% method or 100% method as applicable)			
	Original form with original signature(s), address(es) and telephone number(s) obtained			
- · · · · ·	Check to make certain all signatures can be read. If signature(s) is/are illegible, make certain the applicant names are typed or legibly printed near the corresponding signature. (the notation "L.S." on the form stands for <i>legal signature</i> )			
	All legal owners of the property have signed the application form			
2.	LEGAL DESCRIPTION			
	Legal description of the subject property accompanies application			
	Ask the applicant or representative if an electronic copy of the legal description is available; if so, make arrangements for the electronic information to be furnished to either the Community Development Department or City Clerk's Office			
3.	SECTION 5 VOTING RIGHTS ACT QUESTIONNAIRE			
	Completed Section 5 Voting Rights Act Questionnaire accompanies application			
4.	MAP OF PROPERTY TO BE ANNEXED			
	A tax plat, map or other graphic representation of the subject parcel(s) accompanies the application			
	e reviewed the annexation application with the applicant(s) and/or representative(s) and found the submitted paperwork to be complete and in good order.			
City	staff member signature Date			

This completed form should accompany annexation application materials submitted to the City Clerk's office.

## 2017 SUBMISSION UNDER SECTION 5 OF THE VOTING RIGHTS ACT FOR THE CITY OF SMYRNA, GEORGIA

Map 1	Designation#	LL/Parcel#		
City Ward#		Census Tract#		
Copie Exhib		ordinance (council meeting minutes) are attached, marked:		
Responsible body:		Mayor and Council of the City of Smyrna P.O. Box 1226 Smyrna, GA 30081 Telephone (770) 434-6600		
INFO	RMATION IS A	BE COMPLETED BY APPLICANT. PLEASE BE SURE THIS ACCURATE – IT WILL BE USED TO ESTABLISH EMERGENCY H OUR 911 SYSTEM.		
1.	Is the property to	be annexed vacant? Yes[X] No []		
2.	If NO, name of re	sident(s): <b>\/</b> / <b>A</b>		
3.	Complete street ac	ddress: Formerly known as 1465 Buckner Road (PIN: 17054200010)		
4.	Telephone Number	er 770-241-4656		
5.	Number of registe	red voters before annexation: 0		
	Number	and type of minorities or minority language groups:		
6.	Number of registe	ored voters after annexation: 0		
	Number	and type of minorities or minority language groups:		
7.	Use of property be	efore annexation (i.e., vacant, business, residential): Vacant Land/Residential zone		
8.		ion before annexation: R-20 Cobb County		
9.	Use of property at	ter annexation (i.e., vacant, business, residential). If residential, please state proposed units: MODR - (<=4.5 du/ac) Moderate Density Residential - City of Smyrna - proposed 43 single family homes		
10.	Zoning classificat	ion being requested (if any): RDA - City of Smyrna		
11.		on members of racial or minority groups: N/A		
12.	Total number of a	cres being annexed: 12.7 acres		

## City of Smyrna Application for Annexation

We, the undersigned, who constitute one hundred percent (100%) of the owners of the land by acreage, as described below, which is unincorporated and contiguous to the City of Smyrna, hereby apply to have said area annexed into the City of Smyrna under the provisions of laws of the State of Georgia, said property being annexed being described as follows:

WHEREFORE, THE UNDERSIGNED HEREBY APPLY FOR SUCH ANNEXATION.

JOYCE HOWELL Owner's Printed Name		Owner's Printed Name				
874 Macedonia Road Union Point, GA 30669	770-241-4656					
Address	Telephone#	Address	Telephone#			
Witness the hands and seals of 100% of the record title holders of the land described above:						
Owner's Legal Signature/Date  Owner's Legal Signature/Date						