



# ANNEXATION APPLICATION

Application No. A - \_\_\_\_\_ - \_\_\_\_\_

(PAGE 2 of 11)

(PLEASE PRINT OR TYPE ALL INFORMATION)

**Titleholder:** \_\_\_\_\_  
(Each Titleholder must have a separate, complete form with notarized signatures)

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-mail address: \_\_\_\_\_

\_\_\_\_\_  
*Titleholder's Signature*

\_\_\_\_\_  
*Printed Name of Signatory*

*Signed, sealed and delivered in the presence of:*

*Notary Commission Expires:*

\_\_\_\_\_  
*Notary Public Signature*

The \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

SEAL: