



City of Clatskanie  
Annexation Application

APPLICATION INFORMATION:

Applicant: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Mobile \_\_\_\_\_

Property Owner (if different from above): \_\_\_\_\_

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

Phone: \_\_\_\_\_ Mobile \_\_\_\_\_

GENERAL INFORMATION:

Site Address or Property Location: \_\_\_\_\_

Project Description: \_\_\_\_\_

Map/Tax Lot No.: \_\_\_\_\_ Zone: \_\_\_\_\_ Site Size: \_\_\_\_\_  SQ FT.  Acre

Description of Land to be Annexed: (Legal Description)

ATTACH THE FOLLOWING INFORMATION

1. Map of the site;
2. Property description;
3. Copy of deed;
4. Petition for annexation (reference ORS 222.125);
5. Electors consent (reference ORS 222.125); and
6. Proof of ownership or authority to make application (i.e. tax assessor record or title). All property owners must sign the subject land use petition.
7. Any other information as required by the City to process this application

I hereby certify under penalty of perjury and false swearing that the information I have provided is true and correct and further that I am the sole owner of the property identified herein or I am authorized by ALL the owners to make this application and proof of said authorization is attached.

Applicants Signature

Date

Owner Signature

Date

FOR OFFICE USE ONLY:

Receipt No.: \_\_\_\_\_ Fee: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ Staff Member: \_\_\_\_\_

PETITION FOR ANNEXATION TO THE CITY OF CLATSKANIE, OREGON

**DO NOT SIGN THE ANNEXATION PETITION UNTIL YOU HAVE  
CAREFULLY READ THESE INSTRUCTIONS.**

Attached is a Petition for Annexation to the City of Clatskanie, Oregon. When it is completed and signed, it becomes a legal document requesting that your property be annexed to the City of Clatskanie.

In order to become a part of the City of Clatskanie, you must complete the attached Petition and sign your name. **Please sign your name as it appears on your property deed.** A signature must be included for each name that appears on your property deed.

Anyone who signs as agent, guardian, or trustee for another person must provide the City with documentation of his or her authority to act for that person. In the case of a corporation, or business, the person who is authorized to sign legal documents for the firm may sign the annexation petition.

Please complete the petition thoroughly. An incomplete petition will delay processing of your request.

For additional information, please call City Hall at (503) 728-2622, between the hours of 9:00 a.m. and 5:00 p.m.

FOR OFFICE USE ONLY:

Receipt No.: \_\_\_\_\_ Fee: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ Staff Member: \_\_\_\_\_

Annexation to the City of Clatskanie, Oregon

PETITION

To: The Common Council of the City of Clatskanie, Oregon

We, the undersigned owner(s) of the property described below, hereby petition for and give our consent to annexation of the property to the City of Clatskanie.

The property legal description to be annexed is attached as Exhibit A.

Street Address of Property (if assigned)

Tax Account Number of Property

1. Print Owner Name

Signature of Owner

2. Print Owner Name

Signature of Owner

3. Print Owner Name

Signature of Owner

4. Print Owner Name

Signature of Owner

Please send all correspondence to:

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

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

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

Contact Number: \_\_\_\_\_

We agree that this consent shall be irrevocable and is a covenant and runs with the land, and is binding on our heirs, assignees, or successors in interest.

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_.

Notary Public for Oregon

My commission expires: \_\_\_\_\_

FOR OFFICE USE ONLY:

Receipt No.: \_\_\_\_\_ Fee: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ Staff Member: \_\_\_\_\_

**Electors consent to annexation to the City of Clatskanie, Oregon**

**DO NOT SIGN THE ANNEXATION PETITION UNTIL YOU HAVE  
CAREFULLY READ THESE INSTRUCTIONS**

The following page is Electors Consent to Annexation to the City of Clatskanie, Oregon. When it is completed and signed, it becomes a legal document consenting to annexation to the City of Clatskanie.

In order to become a part of the City of Clatskanie, you must complete the attached consent and sign your name(s). You must be an elector. **Please sign your name as you did when you registered to vote.** A woman should sign her own name. For example "Mary A. Jones", not "Mrs. John A Jones".

**Please complete the form thoroughly. An incomplete  
Form will delay processing of your request.**

For additional information, please call City Hall, at (503) 728-2622, between 9:00 a.m. and 5:00 p.m.

FOR OFFICE USE ONLY:

Receipt No.: \_\_\_\_\_ Fee: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ Staff Member: \_\_\_\_\_

Annexation to the City of Clatskanie, Oregon

ELECTORS CONSENT

To: The Common Council of the City of Clatskanie, Oregon

We, the undersigned elector, who resides on the subject property, hereby consent to annexation of the property to the City of Clatskanie.

The property legal description to be annexed is attached as Exhibit A.

Street Address of Property (if assigned)

Tax Account Number of Property

1. Print Name

Signature of Elector

Residence Address

Voting Precinct Number

Mailing Address (if different from residence)

Date Signed

City, State, Zip

Telephone Number

I agree to waive the one-year time limitation on this consent established by ORS 222.173, and that this consent shall be effective and continue until annexation to the City of Clatskanie occurs.

Signature of Elector

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_, 20\_\_ by \_\_\_\_\_.

Notary Public for Oregon

My commission expires: \_\_\_\_\_

FOR OFFICE USE ONLY:

Receipt No.: \_\_\_\_\_ Fee: \_\_\_\_\_ Hearing Date: \_\_\_\_\_ Staff Member: \_\_\_\_\_